

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

<b>The C/OH Instruction Guide explains how to complete this form.</b>		<b>1</b> Filer ID (Ethics Commission Filers) 00088050	<b>2</b> Total pages filed: 54	
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mrs.	FIRST Chavva A.	MI	<b>OFFICE USE ONLY</b>
	NICKNAME Hava	LAST Johnston	SUFFIX	
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 2230 Jaguar dr  Frisco, TX 75033			Date Hand-delivered or Date Postmarked
				Receipt #      Amount
				Date Processed
				Date Imaged
<b>5</b> CAMPAIGN TREASURER NAME	MS / MRS / MR Mrs.	FIRST Dresden	MI	
	NICKNAME	LAST Goldberg	SUFFIX	
<b>6</b> CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 3400 Columbus Dr.  Frisco, TX 75034			
<b>7</b> CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	
	(214)	994-4782		
<b>8</b> REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)			
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)			
<b>9</b> PERIOD COVERED	Month    Day    Year		THROUGH	Month    Day    Year
	07/01/2024			09/26/2024
<b>10</b> ELECTION	ELECTION DATE Month    Day    Year		ELECTION TYPE	
	11/05/2024		<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
<b>11</b> OFFICE	OFFICE HELD (if any)		<b>12</b> OFFICE SOUGHT (if known)	
			State Representative District 106	

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

2 of 54

**13** C / OH NAME      Johnston, Chavva A. (Mrs.)      **14** Filer ID      (Ethics Commission Filers)  
00088050

**15** NOTICE FROM POLITICAL COMMITTEE(S)  
 Additional Pages

This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

COMMITTEE TYPE  <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	COMMITTEE NAME
	COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

<b>16</b> CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	16,445.24
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	15,793.38
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	2,458.83
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

**17** 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.

Mrs. Chavva A. Johnston  
\_\_\_\_\_  
Signature of Candidate or Officeholder

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      Printed name of officer administering      Title of officer administering oath

**SUBTOTALS - C/OH**

<b>18 FILER NAME</b> Johnston, Chava A. (Mrs.)		<b>19 Filer ID</b> 00088050	(Ethics Commission Filers)
<b>20 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	12,083.24
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	4,362.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$	
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	12,692.02
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	3,101.36
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/35 Rpt: 4/54
<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088050
<b>4</b> Date 07/25/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Abbott, Edward <hr/> <b>6</b> Contributor address; City; State; Zip Code  Frisco, TX 75036	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Amendola, Sally <hr/> Contributor address; City; State; Zip Code  Sanger, TX 76266	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Amendola, Sally <hr/> Contributor address; City; State; Zip Code  Sanger, TX 76266	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Baucum, Trish <hr/> Contributor address; City; State; Zip Code  The Colony, TX 75056	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Beck, Sharon <hr/> Contributor address; City; State; Zip Code  McKinney, TX 75071	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Admin		Employer (See Instructions) Sharon Beck

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/35 Rpt: 5/54
<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088050
<b>4</b> Date 07/21/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Blackstock, Kathleen <hr/> <b>6</b> Contributor address; City; State; Zip Code  Frisco, TX 75036	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Blackstock, Kathleen <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75036	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Blackstock, Kathleen <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75036	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Boulia, Liz <hr/> Contributor address; City; State; Zip Code  Pilot Point, TX 76258	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Insurance agent		Employer (See Instructions) Jeff Adams Insurance Agency
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Boulia, Liz <hr/> Contributor address; City; State; Zip Code  Pilot Point, TX 76258	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Insurance agent		Employer (See Instructions) Jeff Adams Insurance Agency

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/35 Rpt: 6/54
<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088050
<b>4</b> Date 09/19/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bouliia, Liz <hr/> <b>6</b> Contributor address; City; State; Zip Code  Pilot Point, TX 76258	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Insurance agent		<b>9</b> Employer (See Instructions) Jeff Adams Insurance Agency
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Buchanan, Diane <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75034	Amount of Contribution (\$)  \$175.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Buinger, Mary Kay <hr/> Contributor address; City; State; Zip Code  Aubrey, TX 76227	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bywater, Nicole <hr/> Contributor address; City; State; Zip Code  Allen, TX 75002	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) specialist		Employer (See Instructions) City of Allen
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Camm, David <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75036	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/35 Rpt: 7/54
<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088050
<b>4</b> Date 08/14/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cannon, Jill	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>6</b> Contributor address; City; State; Zip Code  Providence Village, TX 76227		
<b>8</b> Principal occupation / Job title (See Instructions) Vice president		<b>9</b> Employer (See Instructions) First American
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Caruthers, Keri	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Denton, TX 76205		
Principal occupation / Job title (See Instructions) Non profit		Employer (See Instructions) IFM
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chancellor, Tabitha	Amount of Contribution (\$)  \$35.00
Contributor address; City; State; Zip Code  Plano, TX 75074		
Principal occupation / Job title (See Instructions) Tech writer		Employer (See Instructions) Fiserv
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chapin, Terri	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Sherman, TX 75092		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Collin County Stonewall Democrats	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code  Plano, TX 75025		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/35 Rpt: 8/54
<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088050
<b>4</b> Date 08/14/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cook, Annick <hr/> <b>6</b> Contributor address; City; State; Zip Code  savannah, TX 76227	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cook, Annick <hr/> Contributor address; City; State; Zip Code  savannah, TX 76227	Amount of Contribution (\$)  \$160.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cook, Annick <hr/> Contributor address; City; State; Zip Code  savannah, TX 76227	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cooper, Deborah <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75034	Amount of Contribution (\$)  \$125.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) DOSTALIYEVA, Kristina <hr/> Contributor address; City; State; Zip Code  Plano, TX 75024	Amount of Contribution (\$)  \$203.00
Principal occupation / Job title (See Instructions) Trainer		Employer (See Instructions) JPMorgan



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/35 Rpt: 9/54
<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088050
<b>4</b> Date 07/25/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dabbs, Paul <hr/> <b>6</b> Contributor address; City; State; Zip Code  Frisco, TX 75036	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dangerfield, Tonya <hr/> Contributor address; City; State; Zip Code  Mckinney, TX 75070	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Tonya Dangerfield, LLC
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dominey, Mark <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75036	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Nonprofit		Employer (See Instructions) Cross-Asia
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dunlap, Rita <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75034	Amount of Contribution (\$)  \$125.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dunmore, Patricia <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75036	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/35 Rpt: 10/54
<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088050
<b>4</b> Date 07/25/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dunmore, Patricia <hr/> <b>6</b> Contributor address; City; State; Zip Code  Frisco, TX 75036	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dvorak, Linda <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75036	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) E Denton, Roberta <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75036	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ewing, Dan <hr/> Contributor address; City; State; Zip Code  The Colony, TX 75056	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) N.A.
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Farooqi, Hassan <hr/> Contributor address; City; State; Zip Code  Murfreesboro, TN 37128	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Costco

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 8/35 Rpt: 11/54
2 FILER NAME Johnston, Chavva A. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00088050
4 Date 08/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frisco Democrats Political Action Committee	7 Amount of Contribution (\$) \$150.00
	6 Contributor address; City; State; Zip Code  Frisco, TX 75036	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Julie	Amount of Contribution (\$) \$12.50
	Contributor address; City; State; Zip Code  Frisco, TX 75036	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodwin, Rose Ann	Amount of Contribution (\$) \$12.50
	Contributor address; City; State; Zip Code  Frisco, TX 75036	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodwin, Vikki	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Austin, TX 78739	
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self: Goodwin & Goodwin Real Estate
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grannan, Shirley	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code  San Marcos, CA 92078	
Principal occupation / Job title (See Instructions) Technical Writer		Employer (See Instructions) Gulf State Marketing

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/35 Rpt: 12/54
<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088050
<b>4</b> Date 09/13/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Guthrie, Roddy <hr/> <b>6</b> Contributor address; City; State; Zip Code  McKinney, TX 75070-7006	<b>7</b> Amount of Contribution (\$)  \$125.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hames, Karen <hr/> Contributor address; City; State; Zip Code  The Colony, TX 75056	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hawkins, Enisa <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75036	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hernandez, Johnanna <hr/> Contributor address; City; State; Zip Code  Providence Village, TX 76227	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) USAHS
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hester, Laura <hr/> Contributor address; City; State; Zip Code  Providence Village, TX 76227	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Customer ops representative		Employer (See Instructions) Symetra

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/35 Rpt: 13/54
<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088050
<b>4</b> Date 09/12/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hester, Laura <hr/> <b>6</b> Contributor address; City; State; Zip Code  Providence Village, TX 76227	<b>7</b> Amount of Contribution (\$)  \$30.00
<b>8</b> Principal occupation / Job title (See Instructions) Customer ops representative		<b>9</b> Employer (See Instructions) Symetra
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hill, Kay <hr/> Contributor address; City; State; Zip Code  Sanger, TX 76266	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hill, Michele <hr/> Contributor address; City; State; Zip Code  Denton, TX 76209	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hodge, Mary <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75036	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Huffman, Dana <hr/> Contributor address; City; State; Zip Code  Richardson, TX 75982	Amount of Contribution (\$)  \$106.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/35 Rpt: 14/54
<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088050
<b>4</b> Date 09/09/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jackson, MJ	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>6</b> Contributor address; City; State; Zip Code  Frisco, TX 75034		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jackson, MJ	Amount of Contribution (\$)  \$125.00
Contributor address; City; State; Zip Code  Frisco, TX 75034		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jackson, MJ	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Frisco, TX 75034		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Janney, Jamie	Amount of Contribution (\$)  \$30.00
Contributor address; City; State; Zip Code  Frisco, TX 75033		
Principal occupation / Job title (See Instructions) Stay at home mom		Employer (See Instructions) Kids
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jimenez, jesse	Amount of Contribution (\$)  \$35.00
Contributor address; City; State; Zip Code  PROVIDENCE VILLAGE, TX 76227		
Principal occupation / Job title (See Instructions) Distribution Center Manager		Employer (See Instructions) Alphabroder

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/35 Rpt: 15/54
<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088050
<b>4</b> Date 08/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jimenez, jesse <hr/> <b>6</b> Contributor address; City; State; Zip Code  PROVIDENCE VILLAGE, TX 76227	<b>7</b> Amount of Contribution (\$)  \$125.00
<b>8</b> Principal occupation / Job title (See Instructions) Distribution Center Manager		<b>9</b> Employer (See Instructions) 1000Bulbs.com
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Johnson, Delaine <hr/> Contributor address; City; State; Zip Code  Providence Village, TX 76227	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Counselor		Employer (See Instructions) Self
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Johnson, Delaine <hr/> Contributor address; City; State; Zip Code  Providence Village, TX 76227	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Counselor		Employer (See Instructions) Self
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Johnston, Hava <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75033	Amount of Contribution (\$)  \$90.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Johnston, Sean <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75033	Amount of Contribution (\$)  \$90.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/35 Rpt: 16/54
<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088050
<b>4</b> Date 09/05/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Johnston, Sean <hr/> <b>6</b> Contributor address; City; State; Zip Code  Frisco, TX 75033	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) None
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Joshi, Madina <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75036	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kannenberg, Wade <hr/> Contributor address; City; State; Zip Code  Sherman, TX 75090	Amount of Contribution (\$)  \$3.00
Principal occupation / Job title (See Instructions) Electronic technician		Employer (See Instructions) Texas instruments
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Keegan, Christine <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75034	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Keegan, Christine <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75034	Amount of Contribution (\$)  \$125.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/35 Rpt: 17/54
<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088050
<b>4</b> Date 09/26/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kennedy, Kathleen <hr/> <b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75024	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kennedy, Kathleen <hr/> Contributor address; City; State; Zip Code  Plano, TX 75024	Amount of Contribution (\$)  \$125.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kenny, Julia <hr/> Contributor address; City; State; Zip Code  Northport, AL 35476	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) King, Sheena <hr/> Contributor address; City; State; Zip Code  McKinney, TX 75071	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Agency Leader		Employer (See Instructions) State Farm
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Knoop, Elizabeth <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75036	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 15/35 Rpt: 18/54
<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088050
<b>4</b> Date 09/15/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Knowles, Jenny <hr/> <b>6</b> Contributor address; City; State; Zip Code  Frisco, TX 75033	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Proposal Writer		<b>9</b> Employer (See Instructions) Dearborn Group
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Koster, Carla <hr/> Contributor address; City; State; Zip Code  Allen, TX 75002	Amount of Contribution (\$)  \$125.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) TEXAS URBAN LIVING
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) L Faustino, Alfred <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75036-1039	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Laursen, Nita <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75034	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Not Employed
Date 07/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lemmond, byron <hr/> Contributor address; City; State; Zip Code  Katy, TX 77449-7504	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 16/35 Rpt: 19/54
<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088050
<b>4</b> Date 08/02/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lemmond, byron <hr/> <b>6</b> Contributor address; City; State; Zip Code  Katy, TX 77449-7504	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 09/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lemmond, byron <hr/> Contributor address; City; State; Zip Code  Katy, TX 77449-7504	Amount of Contribution (\$)  \$7.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Levin, Dan <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75035	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Raptor Restoration
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ligon, Jerry <hr/> Contributor address; City; State; Zip Code  Aubrey, TX 76227	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lockhart,, Melinda <hr/> Contributor address; City; State; Zip Code  McKinney, TX 75072	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 17/35 Rpt: 20/54
<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088050
<b>4</b> Date 07/25/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lushbaugh, Janet	<b>7</b> Amount of Contribution (\$) \$15.00
<b>6</b> Contributor address; City; State; Zip Code  Frisco, TX 75036		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maddren, Carol	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Frisco, TX 75035		
Principal occupation / Job title (See Instructions) Scrum master		Employer (See Instructions) Usaa
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Magee, Lisa	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  The Colony, TX 75056		
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) USDG
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Magee, Lisa	Amount of Contribution (\$) \$125.00
Contributor address; City; State; Zip Code  The Colony, TX 75056		
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Self
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Magee, Lisa	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code  The Colony, TX 75056		
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 18/35 Rpt: 21/54
<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088050
<b>4</b> Date 09/22/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mallet, Penny <hr/> <b>6</b> Contributor address; City; State; Zip Code  Lewisville, TX 75077	<b>7</b> Amount of Contribution (\$)  \$125.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mangarelli, Catherine <hr/> Contributor address; City; State; Zip Code  Aubrey, TX 76227	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Matthews, Jeremy <hr/> Contributor address; City; State; Zip Code  Plano, TX 75025	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mays Development Group <hr/> Contributor address; City; State; Zip Code  New Orleans, LA 70114	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McClendon, Jadzia D <hr/> Contributor address; City; State; Zip Code  Colorado Springs, CO 80910	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 19/35 Rpt: 22/54
<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088050
<b>4</b> Date 07/02/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McDorman, Sharon <hr/> <b>6</b> Contributor address; City; State; Zip Code  Wylie, TX 75098	<b>7</b> Amount of Contribution (\$)  \$35.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McDorman, Sharon <hr/> Contributor address; City; State; Zip Code  Wylie, TX 75098	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) retired teacher		Employer (See Instructions) retired teacher
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Montes, Noel <hr/> Contributor address; City; State; Zip Code  Little Elm, TX 75068	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Auto Adjuster		Employer (See Instructions) Progressive
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Murray, Ashley <hr/> Contributor address; City; State; Zip Code  Lavon, TX 75166	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Homemaker
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Newport, Anna <hr/> Contributor address; City; State; Zip Code  The Colony, TX 75056	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Web developer		Employer (See Instructions) Fieldroutes

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 20/35 Rpt: 23/54
<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088050
<b>4</b> Date 07/26/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nitcholas, Stacie	<b>7</b> Amount of Contribution (\$) \$25.00
<b>6</b> Contributor address; City; State; Zip Code  Frisco, TX 75034		
<b>8</b> Principal occupation / Job title (See Instructions) Teacher		<b>9</b> Employer (See Instructions) LISD
Date 07/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) O'Reilly, Debbie	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code  PLANO, TX 75025		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Plano ISD
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) O'Reilly, Debbie	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  PLANO, TX 75025		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Plano ISD
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) O'Reilly, Debbie	Amount of Contribution (\$) \$125.00
Contributor address; City; State; Zip Code  PLANO, TX 75025		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Plano ISD
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) O'Reilly, Debbie	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code  PLANO, TX 75025		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Plano ISD

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 21/35 Rpt: 24/54
<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088050
<b>4</b> Date 08/14/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Paul, Shay <hr/> <b>6</b> Contributor address; City; State; Zip Code  The Colony, TX 75056	<b>7</b> Amount of Contribution (\$)  \$31.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Perkins, Paula <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75034	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Perkins, Paula <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75036	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Perry, Julie <hr/> Contributor address; City; State; Zip Code  McKinney, TX 75069	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Hear.com
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Peña, Clelia <hr/> Contributor address; City; State; Zip Code  Richardson, TX 75082	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Richardson ISD



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 22/35 Rpt: 25/54
<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088050
<b>4</b> Date 09/25/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Philipose, Sandy	<b>7</b> Amount of Contribution (\$) \$50.00
<b>6</b> Contributor address; City; State; Zip Code  Prosper, TX 75078		
<b>8</b> Principal occupation / Job title (See Instructions) Professor		<b>9</b> Employer (See Instructions) Austin College
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reagor, Linda	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  Frisco, TX 75036		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reilly, Colleen	Amount of Contribution (\$) \$125.00
Contributor address; City; State; Zip Code  Frisco, TX 75034		
Principal occupation / Job title (See Instructions) Client Executive		Employer (See Instructions) Tyler Technologies
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Renzenbrink, Roy	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  Frisco, TX 75035		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reveles, Debbie	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Frisco, TX 75033		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 23/35 Rpt: 26/54
<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088050
<b>4</b> Date 07/19/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Revell, Suzanne	<b>7</b> Amount of Contribution (\$) \$75.00
<b>6</b> Contributor address; City; State; Zip Code  Frisco, TX 75036		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ringness, Jesse	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code  Frisco, TX 75035		
Principal occupation / Job title (See Instructions) TGSE		Employer (See Instructions) TGSE
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ringness, Jesse	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code  Frisco, TX 75035		
Principal occupation / Job title (See Instructions) TGSE		Employer (See Instructions) TGSE
Date 07/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roddy, Mary	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  Frisco, TX 75036		
Principal occupation / Job title (See Instructions)		Employer (See Instructions) retired
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schneyer, Sean	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  The Colony, TX 75056		
Principal occupation / Job title (See Instructions) Customer Solutions Sales Manager		Employer (See Instructions) Ericsson

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 24/35 Rpt: 27/54
<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088050
<b>4</b> Date 09/07/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schneyer, Sean	<b>7</b> Amount of Contribution (\$) \$375.00
<b>6</b> Contributor address; City; State; Zip Code  The Colony, TX 75056		
<b>8</b> Principal occupation / Job title (See Instructions) Customer Solutions Sales Manager		<b>9</b> Employer (See Instructions) Ericsson
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scrogginthorpe, Liz	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Richardson, TX 75080		
Principal occupation / Job title (See Instructions) Product Designer		Employer (See Instructions) Bioworld
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sears, Chris	Amount of Contribution (\$) \$45.00
Contributor address; City; State; Zip Code  Frisco, TX 75034		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shalda, Bernadette	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Frisco, TX 75036		
Principal occupation / Job title (See Instructions) Operations Analyst		Employer (See Instructions) Harmon
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shapiro, Taryn Shapiro	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  The Colony, TX 75056		
Principal occupation / Job title (See Instructions) Executive Assistant		Employer (See Instructions) Equitable Advisors

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 25/35 Rpt: 28/54
<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088050
<b>4</b> Date 07/30/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Skelton, Cheryl	<b>7</b> Amount of Contribution (\$)  \$6.00
<b>6</b> Contributor address; City; State; Zip Code  Lewisville, TX 75077		
<b>8</b> Principal occupation / Job title (See Instructions) Accounting		<b>9</b> Employer (See Instructions) Taco Bueno Corp
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Skelton, Cheryl	Amount of Contribution (\$)  \$6.00
Contributor address; City; State; Zip Code  Lewisville, TX 75077		
Principal occupation / Job title (See Instructions) Accounting		Employer (See Instructions) Taco Bueno Corp
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Camille	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Parker, TX 75002		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, David	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Plano, TX 75075		
Principal occupation / Job title (See Instructions) Political Consultant		Employer (See Instructions) self
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, David	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Plano, TX 75075		
Principal occupation / Job title (See Instructions) Political Consultant		Employer (See Instructions) self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 26/35 Rpt: 29/54
<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088050
<b>4</b> Date 09/22/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, David	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>6</b> Contributor address; City; State; Zip Code  Plano, TX 75075		
<b>8</b> Principal occupation / Job title (See Instructions) Political Consultant		<b>9</b> Employer (See Instructions) self
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stark, Sharon	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Frisco, TX 75035		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stark, Sharon	Amount of Contribution (\$)  \$20.24
Contributor address; City; State; Zip Code  Frisco, TX 75035		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stephens, Fran	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Little Elm, TX 75068		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Strand, Louise	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Frisco, TX 75036		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 27/35 Rpt: 30/54
<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088050
<b>4</b> Date 07/01/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Swan, Sandy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Denton, TX 76209	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Case Worker		<b>9</b> Employer (See Instructions) IFM
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Swan, Sandy <hr/> Contributor address; City; State; Zip Code  Denton, TX 76209	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Case Worker		Employer (See Instructions) IFM
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Swan, Sandy <hr/> Contributor address; City; State; Zip Code  Denton, TX 76209	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Case Worker		Employer (See Instructions) IFM
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Swanson, Lynn <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75034	Amount of Contribution (\$)  \$125.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Terbeek, Leslie <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75034	Amount of Contribution (\$)  \$106.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 28/35 Rpt: 31/54
<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088050
<b>4</b> Date 08/05/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Democratic Women	<b>7</b> Amount of Contribution (\$) \$1,000.00
<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78703		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thomas, Richard	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Frisco, TX 75036		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thomas, Richard	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  Frisco, TX 75036		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thomas, Richard	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  Frisco, TX 75036		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thompsom, Monique	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Little Elm, TX 75068		
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) Self employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 29/35 Rpt: 32/54
<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088050
<b>4</b> Date 07/21/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thompson, Ramona	<b>7</b> Amount of Contribution (\$) \$106.00
<b>6</b> Contributor address; City; State; Zip Code  Frisco, TX 75036		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thompson, Ramona	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Frisco, TX 75036		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thompson, Ramona	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Frisco, TX 75036		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thompson, Ramona	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  Frisco, TX 75036		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thompson, Ramona	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Frisco, TX 75036		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 30/35 Rpt: 33/54
<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088050
<b>4</b> Date 09/06/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thompson, Ramona <hr/> <b>6</b> Contributor address; City; State; Zip Code  Frisco, TX 75036	<b>7</b> Amount of Contribution (\$)  \$400.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tom-Quinn, Linda <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75035	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Executive Assistant		Employer (See Instructions) MHBT
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tookey, Beverly <hr/> Contributor address; City; State; Zip Code  Denton, TX 76205	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tuck, Rebecca <hr/> Contributor address; City; State; Zip Code  Providence Village, TX 76227	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Csam		Employer (See Instructions) Microsoft
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tysell, Ken <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75033	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) AT&T

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 31/35 Rpt: 34/54
<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088050
<b>4</b> Date 07/21/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Van Alstyne, Constancw <hr/> <b>6</b> Contributor address; City; State; Zip Code  Frisco, TX 75036	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Van Hoff, Juliette <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75033	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Johnson&Johnson
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Voorn, Pamela <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75036	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Waddell, Chris <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75036	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Waddell, Chris <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75036	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 32/35 Rpt: 35/54
<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088050
<b>4</b> Date 09/09/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Waddell, Chris <hr/> <b>6</b> Contributor address; City; State; Zip Code  Frisco, TX 75034	<b>7</b> Amount of Contribution (\$)  \$125.00
<b>8</b> Principal occupation / Job title (See Instructions) HR		<b>9</b> Employer (See Instructions) Self
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Walker, Marissa <hr/> Contributor address; City; State; Zip Code  Mckinney, TX 75071	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) VP of Communications		Employer (See Instructions) ENT Specialty Partners
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Walker, Marissa <hr/> Contributor address; City; State; Zip Code  Allen, TX 75013	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Communications Director		Employer (See Instructions) Dallas County Dental Society
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Walker Jr., James <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75036	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Warach, Khurram <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75033	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Civil Engineer		Employer (See Instructions) CDM Smith

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 33/35 Rpt: 36/54
<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088050
<b>4</b> Date 09/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ward, Alisa	<b>7</b> Amount of Contribution (\$)  \$75.00
<b>6</b> Contributor address; City; State; Zip Code  Frisco, TX 75034		
<b>8</b> Principal occupation / Job title (See Instructions) Physician		<b>9</b> Employer (See Instructions) Centennial OB/GYN
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ward, Alisa	Amount of Contribution (\$)  \$45.00
Contributor address; City; State; Zip Code  Frisco, TX 75034		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Centennial OB/GYN
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ward, LEEANNE	Amount of Contribution (\$)  \$35.00
Contributor address; City; State; Zip Code  Frisco, TX 75034		
Principal occupation / Job title (See Instructions) Programmer		Employer (See Instructions) Ushv
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Watkins, Katherine	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Frisco, TX 75036		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Watkins, Katherine	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Frisco, TX 75036		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 34/35 Rpt: 37/54
<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088050
<b>4</b> Date 09/09/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) West, Lisa <hr/> <b>6</b> Contributor address; City; State; Zip Code  McKinney, TX 75072	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Stay at home parent		<b>9</b> Employer (See Instructions) Self
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wood, Sherri <hr/> Contributor address; City; State; Zip Code  Sanger, TX 76266	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Yeoman-Lomangino, Sarah <hr/> Contributor address; City; State; Zip Code  SANGER, TX 76266	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Clinic manager		Employer (See Instructions) Denton county mhmr
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) binnion, dana <hr/> Contributor address; City; State; Zip Code  Denton, TX 76208	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) charley, jacqueline <hr/> Contributor address; City; State; Zip Code  Allen, TX 75002	Amount of Contribution (\$)  \$35.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 35/35 Rpt: 38/54
<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088050
<b>4</b> Date 09/26/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) hawkins, sally <hr/> <b>6</b> Contributor address; City; State; Zip Code  Frisco, TX 75034	<b>7</b> Amount of Contribution (\$)  \$125.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) lenchner, paul <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75036	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) rudkin, lynn <hr/> Contributor address; City; State; Zip Code  Lewisville, TX 75077	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) wicks, alicia <hr/> Contributor address; City; State; Zip Code  Aubrey, TX 76227	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) wiest, charlotte <hr/> Contributor address; City; State; Zip Code  frisco, TX 75035	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) flight attendant		Employer (See Instructions) american airlines

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A2: Sch: 1/2 Rpt: 39/54	
2 FILER NAME Johnston, Chavva A. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00088050	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 07/29/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alliance Catering	8 Amount of contribution (\$) \$367.00	9 In-kind contribution description catering for fundraiser
	7 Contributor address; City; State; Zip Code  frisco, TX 75035	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blue Horizon Texas PAC	Amount of contribution (\$) \$100.00	In-kind contribution description Strategy session, endorsement, social media, email promotion
	Contributor address; City; State; Zip Code  San Antonio , TX 78278	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayden, Marilee	Amount of contribution (\$) \$2,300.00	In-kind contribution description Catering for fundraiser.
	Contributor address; City; State; Zip Code  frisco, TX 75035	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) retired		Employer (FOR NON-JUDICIAL) (See instructions) None	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A2: Sch: 2/2 Rpt: 40/54	
2 FILER NAME Johnston, Chavva A. (Mrs.)		3 Filer ID (Ethics Commission Filers) 00088050	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 09/06/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Winter Consulting	8 Amount of contribution (\$) \$1,500.00	9 In-kind contribution description campaign Video
	7 Contributor address; City; State; Zip Code  Allen , TX 75002	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Ramona	Amount of contribution (\$) \$95.00	In-kind contribution description Cupcake boxes and supplies for bake sale fundraiser
	Contributor address; City; State; Zip Code  Frisco, TX 75036	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			



# 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.

<b>1</b> Total pages Schedule F1: Sch: 1/13 Rpt: 41/54	<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)	<b>3</b> Filer ID (Ethics Commission Filers) 00088050
<b>4</b> Date 07/09/2024	<b>5</b> Payee name 5th street patio cafe	
<b>6</b> Amount (\$) \$7.43	<b>7</b> Payee address; City; State; Zip Code 8621 5th street  Frisco, TX 75035	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FDC breakfast
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/13/2024	Payee name 5th street patio cafe	
Amount (\$) \$21.12	Payee address; City; State; Zip Code 8621 5th street  Frisco, TX 75035	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FDC breakfast meeting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/09/2024	Payee name EXECUTIVE PRESS	
Amount (\$) \$303.00	Payee address; City; State; Zip Code 1400 Presidential Dr #110  Richardson, TX 75080	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hand cards
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.

<b>1</b> Total pages Schedule F1: Sch: 2/13 Rpt: 42/54	<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)	<b>3</b> Filer ID (Ethics Commission Filers) 00088050
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<b>4</b> Date 08/12/2024	<b>5</b> Payee name EXECUTIVE PRESS
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<b>6</b> Amount (\$) \$160.20	<b>7</b> Payee address; City; State; Zip Code 1400 Presidential Dr #110  Richardson, TX 75080
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense flyers
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/12/2024	Payee name EXECUTIVE PRESS
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Amount (\$) \$182.81	Payee address; City; State; Zip Code 1400 Presidential Dr #110  Richardson, TX 75080
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard signs
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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 09/09/2024	Payee name EXECUTIVE PRESS
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Amount (\$) \$1,288.93	Payee address; City; State; Zip Code 1400 Presidential Dr #110  Richardson, TX 75080
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense door hangers
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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.

<b>1</b> Total pages Schedule F1: Sch: 3/13 Rpt: 43/54	<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)	<b>3</b> Filer ID (Ethics Commission Filers) 00088050
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<b>4</b> Date 09/09/2024	<b>5</b> Payee name EXECUTIVE PRESS
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<b>6</b> Amount (\$) \$339.91	<b>7</b> Payee address; City; State; Zip Code 1400 Presidential Dr #110  Richardson, TX 75080
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard signs
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/28/2024	Payee name Hilton garden inn
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Amount (\$) \$14.56	Payee address; City; State; Zip Code 500 N Interstate 35,  Austin, TX 78701
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel Out of District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hotel stay for candidate Training in Austin
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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 07/03/2024	Payee name Intuit Quick Books
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Amount (\$) \$9.59	Payee address; City; State; Zip Code 2750 Coast Ave  Mountain View , CA 94043
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Quick books
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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.

<b>1</b> Total pages Schedule F1: Sch: 4/13 Rpt: 44/54	<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)	<b>3</b> Filer ID (Ethics Commission Filers) 00088050
<b>4</b> Date 08/07/2024	<b>5</b> Payee name Intuit Quick Books	
<b>6</b> Amount (\$) \$9.59	<b>7</b> Payee address; City; State; Zip Code 2750 Coast Ave  Mountain View , CA 94043	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense quick books
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/09/2024	Payee name Intuit Quick Books	
Amount (\$) \$9.59	Payee address; City; State; Zip Code 2750 Coast Ave  Mountain View , CA 94043	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense quick books
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/29/2024	Payee name Jakes Burgers	
Amount (\$) \$70.78	Payee address; City; State; Zip Code 6195 main st  Frisco, TX 75035	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FDC happy hour
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F1: Sch: 5/13 Rpt: 45/54	<b>2</b>	FILER NAME Johnston, Chavva A. (Mrs.)	<b>3</b>	Filer ID (Ethics Commission Filers) 00088050
<b>4</b>	Date 07/23/2024	<b>5</b>	Payee name Mailchimp		
<b>6</b>	Amount (\$) \$1.99	<b>7</b>	Payee address; City; State; Zip Code 405 N Angier Ave  atlanta, GA 30308		
<b>8</b>	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense email program		
<b>9</b>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 08/01/2024		Payee name Mailchimp		
	Amount (\$) \$21.32		Payee address; City; State; Zip Code 405 N Angier Ave  atlanta, GA 30308		
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email program		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 08/14/2024		Payee name Mailchimp		
	Amount (\$) \$12.79		Payee address; City; State; Zip Code 405 N Angier Ave  atlanta, GA 30308		
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense virtual mailbox rental		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 6/13 Rpt: 46/54	<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)	<b>3</b> Filer ID (Ethics Commission Filers) 00088050
<b>4</b> Date 09/03/2024	<b>5</b> Payee name Mailchimp	
<b>6</b> Amount (\$) \$42.64	<b>7</b> Payee address; City; State; Zip Code 405 N Angier Ave  atlanta, GA 30308	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense email program
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/22/2024	Payee name Marios Mexican	
Amount (\$) \$95.80	Payee address; City; State; Zip Code 2831 Eldorado Pkwy #112  Little Elm, TX 75068	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Drinking Liberally meeting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/02/2024	Payee name NPG Van	
Amount (\$) \$106.00	Payee address; City; State; Zip Code 655 15th St NW, Suite 650  washington D.C, DC 20052	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</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 Voter database access
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.

<b>1</b> Total pages Schedule F1: Sch: 7/13 Rpt: 47/54	<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)	<b>3</b> Filer ID (Ethics Commission Filers) 00088050
<b>4</b> Date 09/05/2024	<b>5</b> Payee name NPG Van	
<b>6</b> Amount (\$) \$106.60	<b>7</b> Payee address; City; State; Zip Code 655 15th St NW, Suite 650  washington D.C, DC 20052	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense voter database software
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/06/2024	Payee name NPG Van	
Amount (\$) \$106.60	Payee address; City; State; Zip Code 655 15th St NW, Suite 650  washington D.C, DC 20052	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense voter database software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/02/2024	Payee name One Notary	
Amount (\$) \$25.00	Payee address; City; State; Zip Code 415 Mission Street FL 37  San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Notary services	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Notary fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F1: Sch: 8/13 Rpt: 48/54	<b>2</b>	FILER NAME Johnston, Chavva A. (Mrs.)	<b>3</b>	Filer ID (Ethics Commission Filers) 00088050
<b>4</b>	Date 09/03/2024	<b>5</b>	Payee name Petroff, Suzi		
<b>6</b>	Amount (\$) \$400.00	<b>7</b>	Payee address; City; State; Zip Code 10802 Dove Brook Cir  Dallas, TX 75230		
<b>8</b>	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office rental		
<b>9</b>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 08/01/2024		Payee name Rotate bar and grill		
	Amount (\$) \$80.78		Payee address; City; State; Zip Code 5454 Main St #123  frisco, TX 75033		
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Frisco Diversity Council network meeting		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 07/22/2024		Payee name Sunny Street Cafe		
	Amount (\$) \$28.78		Payee address; City; State; Zip Code 2705 Little Elm Pkwy,  Little Elm, TX 75068		
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Blue Neighbor Network meeting		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F1: Sch: 9/13 Rpt: 49/54	<b>2</b>	FILER NAME Johnston, Chavva A. (Mrs.)	<b>3</b>	Filer ID (Ethics Commission Filers) 00088050
<b>4</b>	Date 09/16/2024	<b>5</b>	Payee name The brass Tap		
<b>6</b>	Amount (\$) \$43.30	<b>7</b>	Payee address; City; State; Zip Code 1951 FM 423 ste 900  Frisco, TX 75033		
<b>8</b>	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Precinct blockwalk event		
<b>9</b>		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 07/02/2024		Payee name The colony print and ship		
	Amount (\$) \$29.97		Payee address; City; State; Zip Code 6805 Main St #430  the colony, TX 75056		
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Virtual mail box		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 08/05/2024		Payee name The colony print and ship		
	Amount (\$) \$9.99		Payee address; City; State; Zip Code 6805 Main St #430  the colony, TX 75056		
	<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense virtual mailbox rental		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 10/13 Rpt: 50/54	<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)	<b>3</b> Filer ID (Ethics Commission Filers) 00088050
<b>4</b> Date 09/06/2024	<b>5</b> Payee name The colony print and ship	
<b>6</b> Amount (\$) \$9.99	<b>7</b> Payee address; City; State; Zip Code 6805 Main St #430  the colony, TX 75056	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Virtual mailbox
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/01/2024	Payee name Tollerson, Yvette	
Amount (\$) \$385.00	Payee address; City; State; Zip Code 3111 Creekridge sachse, TX 75078	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Tshirts for blockwalking
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/22/2024	Payee name Truist	
Amount (\$) \$0.80	Payee address; City; State; Zip Code 12292 FM 423  FRisco, TX 75033	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense bank fee
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.

<b>1</b> Total pages Schedule F1: Sch: 11/13 Rpt: 51/54	<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)	<b>3</b> Filer ID (Ethics Commission Filers) 00088050
<b>4</b> Date 09/09/2024	<b>5</b> Payee name Truist	
<b>6</b> Amount (\$) \$72.00	<b>7</b> Payee address; City; State; Zip Code 12292 FM 423  FRisco, TX 75033	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense bank fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/08/2024	Payee name Walmart	
Amount (\$) \$79.49	Payee address; City; State; Zip Code 12220 Fm 423  FRisco, TX 75033	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food and beverages for campaign event
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/16/2024	Payee name Walmart	
Amount (\$) \$22.67	Payee address; City; State; Zip Code 12220 Fm 423  FRisco, TX 75033	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense duct tape and sign supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 12/13 Rpt: 52/54	<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)	<b>3</b> Filer ID (Ethics Commission Filers) 00088050
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<b>4</b> Date 07/02/2024	<b>5</b> Payee name polaris group
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<b>6</b> Amount (\$) \$1,000.00	<b>7</b> Payee address; City; State; Zip Code 7210 Virginia Pkwy ste 100 box 6385, mckinney, TX 75071
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</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 consulting
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/05/2024	Payee name polaris group
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Amount (\$) \$2,531.00	Payee address; City; State; Zip Code 7210 Virginia Pkwy ste 100 box 6385, mckinney, TX 75071
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting fees
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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 08/21/2024	Payee name polaris group
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Amount (\$) \$1,531.00	Payee address; City; State; Zip Code 7210 Virginia Pkwy ste 100 box 6385, mckinney, TX 75071
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting fee
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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.

<b>1</b> Total pages Schedule F1: Sch: 13/13 Rpt: 53/54	<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)	<b>3</b> Filer ID (Ethics Commission Filers) 00088050
<b>4</b> Date 09/03/2024	<b>5</b> Payee name polaris group	
<b>6</b> Amount (\$) \$1,531.00	<b>7</b> Payee address; City; State; Zip Code 7210 Virginia Pkwy ste 100 box 6385, mckinney, TX 75071	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/05/2024	Payee name polaris group	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 7210 Virginia Pkwy ste 100 box 6385, mckinney, TX 75071	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense consulting fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/02/2024	Payee name smith, David	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 1600 Amelia Court, Apt. 1023 Plano, TX 75075	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Field work consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

### EXPENDITURE CATEGORIES FOR BOX 10(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
	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F2: Sch: 1/1 Rpt: 54/54	<b>2</b> FILER NAME Johnston, Chavva A. (Mrs.)	<b>3</b> Filer ID (Ethics Commission Filers) 00088050
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<b>4</b> TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$
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<b>5</b> Date 09/06/2024	<b>6</b> Payee name EXECUTIVE PRESS
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<b>7</b> Amount (\$) \$3,101.36	<b>8</b> Payee address; City; State; Zip Code 1400 Presidential Dr #110  Richardson, TX 75080
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Road signs and yard signs
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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