CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to cor	nplete this form.	1 Filer ID (Ethics Commi 00088050	ssion Filers)	2 Total pages file 5	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI		JSE ONLY
OFFICEHOLDER	Mrs.	Chavva A.				
NAME					Date Received	
					ELECTRONICA	ALLY FILED
	NICKNAME	LAST		SUFFIX	10/03/2024	
	Hava	Johnston				
4 CANDIDATE /	ADDRESS / PO BOX; A	PT / SUITE #; CI	ΓY;	ZIP CODE	Date Hand-delivered or	r Date Postmarked
OFFICEHOLDER MAILING	2230 Jaguar dr					
ADDRESS					Receipt #	Amount
Change of Address	Fricos TV 75022					
Change of Address	Frisco, TX 75033				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER	Mrs.	Dresden				
NAME	111.5.	Diesden				
	NICKNAME	LAST		SUFFIX		
		Goldberg				
6 CAMPAIGN	STREET ADDRESS (NO	PO BOX PLEASE):	AP ⁻	r / SUITE #; CITY;	STA	TE; ZIP CODE
TREASURER	3400 Columbus Dr.	, , , , , , , , , , , , , , , , , , , ,				,
ADDRESS	5400 Columbus Di.					
(Residence or Business)						
	Frisco, TX 75034					
7 CAMPAIGN TREASURER	AREA CODE PH	IONE NUMBER	EXTENSION			
PHONE	(214) 994-4782					
8 REPORT						
TYPE	January 15	X 30th day before	e election	Runoff	15th day after car	
				_	appointment (offic	
	July 15	8th day before	election	Exceeded modified reporting limit	Final Report (Atta	ich C/OH-FR)
9 PERIOD	Month Day Yea	ar		Month Day	Year	
COVERED	07/01/2024	TI	HROUGH	09/26/2024	1	
10 ELECTION	ELECTION DATE	ĺ		ELECTION TYPE		
	Month Day Yea		Primary	Runoff	Other	
	11/05/2024					
		X	General	Special		
11 OFFICE	OFFICE HELD (if any)	1		12 OFFICE SOUGHT	(if known)	
				State Representa		
		GO ⁻	TO PAGE 2			
				-	\/_ ···	
Forms provided by Le	exas Ethics Commission	www.e	thics.state.tx.u	S	Versi	on V4.1.0.48da51f7

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of	54
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13 C / OH NAME	Johnston, Chavva A.	(Mrs.)	14 Filer ID 00088050	(Ethics Com	mission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without d officeholders are required to report this information	the candidate's or offic	eholder's kn	owledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS		
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		, \$	0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	S)	\$	16,445.24
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL EXPENDITURES		\$	0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$	15,793.38
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$	2,458.83
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT					
		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.			
		Mrs. C	Chavva A. Johnston		
		Signature of	f Candidate or Officeho	older	
AFFIX NO	TARY STAMP / SEAL AB	DVE			
		aid	, this the		day
of	, 20, to ce	ertify which, witness my hand and seal of office.			
Signature of offi	cer administering	Printed name of officer administering	Title of office	er administer	ng oath
	vac Ethios Commission	www.othios.state.tv.us			4 1 0 49doE1f7

S	UBT	OTALS - C/OH	C	OVER	FORM C/OH SHEET PG 3 3 of 54
	ER NAM	ME Chavva A. (Mrs.)	19 Filer ID 00088050	(Ethics	Commission Filers)
		E SUBTOTALS SCHEDULE		SL	JBTOTAL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	12,083.24
2.	Х	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	4,362.00
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	6	\$	12,692.02
6.	Х	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	3,101.36
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

				1		
The Inst	ruction Guide explains how	to complete this f	orm.		Total pages Schedule A1: Sch: 1/35 Rpt: 4/54	
2 FILER NAM	1E			3	Filer ID (Ethics Commission	n Filers)
Johnston,	Chavva A. (Mrs.)				00088050	
4 Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
07/25/202	4 Abbott, Edward					\$50.00
	6 Contributor address; City; St	ate; Zip Code		1		
	Frisco, TX 75036					
	cupation / Job title (See Instructions)	9 Employer (See Instructions	5)		
Not Emple	byed		Not Employed			
Date	Full name of contributor	out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
07/29/202	4 Amendola, Sally					\$10.00
	Contributor address; City; St			1		
	Sanger, TX 76266					
	cupation / Job title (See Instructions)	Employer (See Instructions	5)		
Not Emple	byed		Not Employed			
Date	Full name of contributor	out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
08/29/202	4 Amendola, Sally					\$10.00
	Contributor address; City; St	ate; Zip Code		1		
	Sanger, TX 76266					
	cupation / Job title (See Instructions)	Employer (See Instructions	5)		
Not Emple	oyed		Not Employed			
Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
08/14/202	4 Baucum, Trish					\$25.00
	Contributor address; City; St	ate; Zip Code		1		
	The Colony, TX 75056		i			
	cupation / Job title (See Instructions)	Employer (See Instructions	5)		
Not Emple	oyed		Not Employed			
Date	Full name of contributor	out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
09/09/202	4 Beck, Sharon					\$10.00
	Contributor address; City; St	ate; Zip Code		1		
	McKinney, TX 75071		•			
-	cupation / Job title (See Instructions)	Employer (See Instructions	5)		
Admin			Sharon Beck			

	The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 2/35 Rpt: 5/54
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Johnston, Cl	havva A. (Mrs.)		00088050
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
	07/21/2024	Blackstock, Kathleen		\$25.00
		6 Contributor address; City; State; Zip Code		1
	Dringing oppu	Frisco, TX 75036		
8	Principal occu Not Employe	ipation / Job title (See Instructions)	9 Employer (See Instructions Not Employed	6)
				T
	Date)	Amount of Contribution (\$)
	09/13/2024			\$25.00
		Contributor address; City; State; Zip Code		
		Frisco, TX 75036		
-	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)
	Not Employe		Not Employed	
╞─	Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)
	09/19/2024	Blackstock, Kathleen	/	\$20.00
	•••	Contributor address; City; State; Zip Code		
		Frisco, TX 75036		
		ipation / Job title (See Instructions)	Employer (See Instructions	5)
	Not Employe	ed	Not Employed	
	Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	07/19/2024	Boulia, Liz		\$25.00
		Contributor address; City; State; Zip Code		1
_	Dringinglagou	Pilot Point, TX 76258		
	Insurance ag	Ipation / Job title (See Instructions)	Employer (See Instructions Jeff Adams Insurance A	
╘				
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	08/19/2024	Boulia, Liz		\$25.00
		Contributor address; City; State; Zip Code		
		Pilot Point, TX 76258		
\vdash	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)
	Insurance ag		Jeff Adams Insurance A	
⊢		<u>,</u>	<u> </u>	

	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 3/35 Rpt: 6/54
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Johnston, Cl	havva A. (Mrs.)		00088050
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
	09/19/2024	Boulia, Liz		\$25.00
	1	6 Contributor address; City; State; Zip Code		
	I			
	l			
		Pilot Point, TX 76258		
8		pation / Job title (See Instructions)	9 Employer (See Instructions)	
	Insurance ag	jent	Jeff Adams Insurance A	gency
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	09/24/2024	Buchanan, Diane		\$175.00
	l	Contributor address; City; State; Zip Code		
	l			
	I	Friend TV 75024		
	Dringingl occu	Frisco, TX 75034 pation / Job title (See Instructions)	Employer (See Instructions	
	Not employe		Not employed	>)
⊨				
	Date 09/05/2024	Full name of contributor out-of-state PAC (ID#: Buinger, Mary Kay)	Amount of Contribution (\$) \$250.00
	0910012024			φ230.00
		Contributor address; City; State; Zip Code		
	I			
	l	Aubrey, TX 76227		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)
	Not Employe	;d	Not Employed	
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	08/23/2024	Bywater, Nicole		\$10.00
	I	Contributor address; City; State; Zip Code		
	l			
	I			
	21.1.1	Allen, TX 75002		·
		pation / Job title (See Instructions)	Employer (See Instructions) City of Allen	5)
	specialist		<u> </u>	r
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	07/21/2024	Camm, David		\$25.00
	l	Contributor address; City; State; Zip Code		
	I			
	l	Frisco, TX 75036		
-	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
	Not Employe		Not Employed)
-				

SCHEDULE	A1
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The Instru	iction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 4/35 Rpt: 7/54
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	havva A. (Mrs.)		00088050
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
08/14/2024	Cannon, Jill		\$25.
	6 Contributor address; City; State; Zip Code		1
	Providence Village, TX 76227		
	upation / Job title (See Instructions)	9 Employer (See Instructions	3)
Vice preside	2nt	First American	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
09/12/2024			\$25.
	Contributor address; City; State; Zip Code		1
	Denton, TX 76205		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)
Non profit		IFM	<i>''</i>
-			1
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/09/2024			\$35.
l	Contributor address; City; State; Zip Code		1
l		ļ	
	Plano, TX 75074		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)
Tech writer		Fiserv	
Date	Full name of contributor out-of-state PAC (ID#:_	,	Amount of Contribution (\$)
08/14/2024	Chapin, Terri		\$25.
	Contributor address; City; State; Zip Code		4
1			
	Sherman, TX 75092		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)
Not Employe		Not Employed	<i>,</i> ,
			T
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
09/13/2024	· · · · · · · · · · · · · · · · · · ·		\$100.
	Contributor address; City; State; Zip Code]
1			
	Plano, TX 75025		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)
1			
		<u> </u>	
1			
1			

The Instruc	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 5/35 Rpt: 8/54	
2 FILER NAME			3 Filer ID (Ethics Commission Fi	ilers)
Johnston, Cl	havva A. (Mrs.)		00088050	
4 Date	5 Full name of contributor out-of-state PAC (ID#	ŧ:)	7 Amount of Contribution (\$)	
08/14/2024	Cook, Annick			\$25.00
	6 Contributor address; City; State; Zip Code			
	savannah, TX 76227			
8 Principal occu	I pation / Job title (See Instructions)	9 Employer (See Instructions	<u>ا</u> ۶)	
Not Employe		Not Employed	,	
Date	Full name of contributor out-of-state PAC (ID#	t ⁻	Amount of Contribution (\$)	
09/10/2024	Cook, Annick	··/		\$160.00
00,10,202				P100.00
	Contributor address, City, State, Zip Code			
	savannah, TX 76227			
Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ۶)	
Not Employe	ed	Not Employed		
Date	Full name of contributor out-of-state PAC (ID#	<i>t:</i>)	Amount of Contribution (\$)	
09/10/2024	Cook, Annick			\$10.00
	Contributor address; City; State; Zip Code			
	savannah, TX 76227			
	pation / Job title (See Instructions)	Employer (See Instructions	;)	
Not Employe	2d	Not Employed		
Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)	
09/20/2024	Cooper, Deborah		\$	\$125.00
	Contributor address; City; State; Zip Code			
	Frisco, TX 75034			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
Not Employe		Not Employed	<i>''</i>	
Date	Full name of contributor Out-of-state PAC (ID#		Amount of Contribution (\$)	
08/15/2024	DOSTALIYEVA, Kristina	·/		\$203.00
00/10/202 .	Contributor address; City; State; Zip Code			P200.00
	Contributor address, City, State, Zip Code			
	Plano, TX 75024			
Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ۶)	
Trainer		JPMorgan	,	

In total pages Schedule A1: Sch: 6/35 Rpt: 9/54 2 FILER NAME 3 Filer ID (Ethics Commission Filers 00088050 3 Date 5 Full name of contributor out-of-state PAC (D#
Johnston, C⊢uva A. (Mrs.) 00088050 4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Amount of Contribution (\$) \$23 07/25/2024 Dabbs, Paul
Johnston, C⊢uva A. (Mrs.) 00088050 4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Amount of Contribution (\$) \$23 07/25/2024 Dabbs, Paul
07/25/2024 Dabbs, Paul
6 Contributor address; City; State; Zip Code Frisco, TX 75036 Frisco, TX 75036 8 Principal occupation / Job title (See Instructions) Not Employed 9 Employer (See Instructions) Not Employed Date Full name of contributor out-of-state PAC (ID#:) Dangerfield, Tonya Amount of Contribution (\$) Contributor address; City; State; Zip Code 09/05/2024 Dangerfield, Tonya Amount of Contribution (\$) Contributor address; City; State; Zip Code Principal occupation / Job title (See Instructions) Realtor Employer (See Instructions) Tonya Dangerfield, LLC Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Tonya Dangerfield, LLC Date Full name of contributor out-of-state PAC (ID#:) Tonya Dangerfield, LLC Date Full name of contributor out-of-state PAC (ID#:) Tonya Dangerfield, LLC
Frisco, TX 75036 9 Employer (See Instructions) Not Employed Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (D#:) Dangerfield, Tonya Amount of Contribution (\$) 09/05/2024 Full name of contributor address; City; State; Zip Code Amount of Contribution (\$) Mckinney, TX 75070 Employer (See Instructions) Not Employer (See Instructions) Dangerfield, Tonya Employer (See Instructions) Date Principal occupation / Job title (See Instructions) Realtor Employer (See Instructions) Tonya Dangerfield, LLC Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/14/2024 Opminey, Mark Amount of Contribution (\$)
8 Principal occupation / Job title (See Instructions) Not Employed 9 Employer (See Instructions) Not Employed Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/05/2024 Dangerfield, Tonya \$3! Contributor address; City; State; Zip Code Mckinney, TX 75070 Principal occupation / Job title (See Instructions) Realtor Employer (See Instructions) Tonya Dangerfield, LLC Date Full name of contributor out-of-state PAC (ID#:) Amount of Contributor (\$) Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Realtor Employer (See Instructions) Og/14/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Amount of Contribution (\$)
8 Principal occupation / Job title (See Instructions) Not Employed 9 Employer (See Instructions) Not Employed Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/05/2024 Dangerfield, Tonya \$3! Contributor address; City; State; Zip Code Mckinney, TX 75070 Principal occupation / Job title (See Instructions) Realtor Employer (See Instructions) Tonya Dangerfield, LLC Date Full name of contributor out-of-state PAC (ID#:) Amount of Contributor (\$) Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Realtor Employer (See Instructions) Og/14/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Amount of Contribution (\$)
8 Principal occupation / Job title (See Instructions) Not Employed 9 Employer (See Instructions) Not Employed Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/05/2024 Dangerfield, Tonya \$3! Contributor address; City; State; Zip Code Mckinney, TX 75070 Principal occupation / Job title (See Instructions) Realtor Employer (See Instructions) Tonya Dangerfield, LLC Date Full name of contributor out-of-state PAC (ID#:) Amount of Contributor (\$) Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Realtor Employer (See Instructions) Og/14/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Amount of Contribution (\$)
Not Employed Not Employed Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/05/2024 Dangerfield, Tonya S38 Contributor address; City; State; Zip Code Amount of Contribution (\$) Mckinney, TX 75070 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Realtor Tonya Dangerfield, LLC Date Full name of contributor out-of-state PAC (ID#:) 09/14/2024 Dominey, Mark Amount of Contribution (\$)
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/05/2024 Dangerfield, Tonya \$38 Contributor address; City; State; Zip Code Mckinney, TX 75070 Principal occupation / Job title (See Instructions) Employer (See Instructions) Realtor Tonya Dangerfield, LLC Date Full name of contributor out-of-state PAC (ID#:) 09/14/2024 Dominey, Mark S10
09/05/2024 Dangerfield, Tonya \$38 Contributor address; City; State; Zip Code \$38 Mckinney, TX 75070 Mckinney, TX 75070 Principal occupation / Job title (See Instructions) Realtor Employer (See Instructions) Tonya Dangerfield, LLC Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$10 09/14/2024 Dominey, Mark
Contributor address; City; State; Zip Code Mckinney, TX 75070 Principal occupation / Job title (See Instructions) Realtor Date Full name of contributor 09/14/2024 Dominey, Mark
Mckinney, TX 75070 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Realtor Tonya Dangerfield, LLC Date Full name of contributor out-of-state PAC (ID#:) 09/14/2024 Dominey, Mark
Principal occupation / Job title (See Instructions) Employer (See Instructions) Realtor Tonya Dangerfield, LLC Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/14/2024 Dominey, Mark \$10
Principal occupation / Job title (See Instructions) Employer (See Instructions) Realtor Tonya Dangerfield, LLC Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/14/2024 Dominey, Mark \$10
Principal occupation / Job title (See Instructions) Employer (See Instructions) Realtor Tonya Dangerfield, LLC Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/14/2024 Dominey, Mark \$10
Realtor Tonya Dangerfield, LLC Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/14/2024 Dominey, Mark \$10
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/14/2024 Dominey, Mark \$10
09/14/2024 Dominey, Mark \$10
Frisco, TX 75036
Principal occupation / Job title (See Instructions) Employer (See Instructions)
Nonprofit Cross-Asia
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
09/26/2024 Dunlap, Rita \$12
Contributor address; City; State; Zip Code
Frisco, TX 75034
Principal occupation / Job title (See Instructions) Employer (See Instructions)
Not Employed Not Employed
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 07/21/2024 Dunmore, Patricia \$29
Contributor address; City; State; Zip Code
Contributor address, City, State, Zip Code
Frisco, TX 75036
Frisco, TX 75036 Principal occupation / Job title (See Instructions) Employer (See Instructions)

The Instru	ction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: Sch: 7/35 Rpt: 10/54	
2 FILER NAME			3 Filer ID (Ethics Commission File	lers)
	havva A. (Mrs.)		00088050	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
07/25/2024	Dunmore, Patricia		5	\$50.00
	6 Contributor address; City; State; Zip Code			
 D in simplifications 	Frisco, TX 75036		、 、	
8 Principal occu Not Employe	upation / Job title (See Instructions)	9 Employer (See Instructions))	
		Not Employed		
Date)	Amount of Contribution (\$)	
07/22/2024			3	\$50.00
	Contributor address; City; State; Zip Code			
	Frisco, TX 75036			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>	
Not Employe		Not Employed	,	
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/20/2024	E Denton, Roberta			250.00
	Contributor address; City; State; Zip Code			
	Frisco, TX 75036			
•	upation / Job title (See Instructions)	Employer (See Instructions))	
Not Employe	ed	Not Employed		
Date)	Amount of Contribution (\$)	
08/14/2024	Ewing, Dan		Ş	\$50.00
	Contributor address; City; State; Zip Code			
	The Colony, TX 75056			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)		
Sales		N.A.		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/21/2024	Farooqi, Hassan			\$25.00
	Contributor address; City; State; Zip Code			
	Murfreesboro, TN 37128			
	upation / Job title (See Instructions)	Employer (See Instructions))	
Software En	igineer	Costco		

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

	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 9/35 Rpt: 12/54	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
_		havva A. (Mrs.)			00088050	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	09/13/2024	Guthrie, Roddy				\$125.00
		6 Contributor address; City; State; Zip Code				
		McKinney, TX 75070-7006				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Not Employe	эd	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	08/15/2024	Hames, Karen				\$25.00
		Contributor address; City; State; Zip Code				
		The Colony, TX 75056				
		upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Not Employe	2d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:_)	Τ	Amount of Contribution (\$)	
	09/10/2024	Hawkins, Enisa				\$25.00
	l	Contributor address; City; State; Zip Code				
		Frisco, TX 75036				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u>		
	Not Employe		Not Employed	3)		
╞	Date	Full name of contributor out-of-state PAC (ID#:		Т	Amount of Contribution (\$)	
	09/19/2024	Hernandez, Johnanna	/			\$50.00
	001101202	Contributor address; City; State; Zip Code				400.00
		Contributor address, City, State, Zip Code				
		Providence Village, TX 76227				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Professor		USAHS			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/10/2024	Hester, Laura				\$15.00
	Contributor address; City; State; Zip Code					
		Providence Village, TX 76227	1			
		upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Customer op	ps representative	Symetra			

The Instrue	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 10/35 Rpt: 13/54
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Johnston, Ch	havva A. (Mrs.)		00088050
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
09/12/2024	Hester, Laura		\$30.00
	6 Contributor address; City; State; Zip Code		
	Providence Village, TX 76227		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)
Customer op	os representative	Symetra	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/15/2024	Hill, Kay	,	\$25.00
	Contributor address; City; State; Zip Code		
	······································		
	Sanger, TX 76266		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)
Not Employe	ed .	Not Employed	
Date	Full name of contributor Out-of-state PAC (ID#:_)	Amount of Contribution (\$)
09/12/2024	Hill, Michele		\$25.00
	Contributor address; City; State; Zip Code		•
	Denton, TX 76209		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)
Not Employe	ed .	Not Employed	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
07/24/2024	Hodge, Mary		\$100.00
	Contributor address; City; State; Zip Code		
	Frisco, TX 75036		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)
Not Employe	ed .	Not Employed	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/15/2024	Huffman, Dana	/	\$106.00
	Contributor address; City; State; Zip Code		
	Richardson, TX 75982		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	I S)
Attorney		Self	,

The Instru	ction Guide explains how to complete	e this form.	1 Total pages Schedule A1: Sch: 11/35 Rpt: 14/54
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Johnston, Cl	havva A. (Mrs.)		00088050
4 Date 09/09/2024	5 Full name of contributor out-of-state P. Jackson, MJ	PAC (ID#:)	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code		
	Frisco, TX 75034		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)
Not Employe	ed set of the set of t	Not Employed	
Date	Full name of contributor out-of-state P.	PAC (ID#:)	Amount of Contribution (\$)
09/12/2024	Jackson, MJ		\$125.00
	Contributor address; City; State; Zip Code		
	Frisco, TX 75034		
	ipation / Job title (See Instructions)	Employer (See Instructions	s)
Not Employe	;d	Not Employed	
Date	Full name of contributor out-of-state P	PAC (ID#:)	Amount of Contribution (\$)
09/25/2024	Jackson, MJ		\$50.00
	Contributor address; City; State; Zip Code		
	Frisco, TX 75034		
Principal occu Not Employe	ipation / Job title (See Instructions) ed	Employer (See Instructions Not Employed	s)
Date	Full name of contributor out-of-state P.	PAC (ID#:)	Amount of Contribution (\$)
09/24/2024	Janney, Jamie		\$30.00
	Contributor address; City; State; Zip Code		
	Frisco, TX 75033		
Principal occu Stay at home	ipation / Job title (See Instructions) e mom	Employer (See Instructions Kids	s)
Date	Full name of contributor out-of-state P.	AC (ID#:)	Amount of Contribution (\$)
08/14/2024	Jimenez, jesse		\$35.00
	Contributor address; City; State; Zip Code		
	PROVIDENCE VILLAGE, TX 76227		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)
	Center Manager	Alphabroder	-,
		I	

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

	The Instru	ction Guide explains how	v to complete this f	orm.	1	Total pages Schedule A1: Sch: 13/35 Rpt: 16/54	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
		havva A. (Mrs.)				00088050	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	09/05/2024	Johnston, Sean					\$1,000.00
	l	6 Contributor address; City; St	tate; Zip Code		1		
		Frisco, TX 75033					
8	Principal occu	pation / Job title (See Instructions)	3)	9 Employer (See Instructions	. 5)		
	retired			None			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	07/21/2024	Joshi, Madina	—				\$25.00
	I	Contributor address; City; St					
		Frisco, TX 75036		-			
		pation / Job title (See Instructions	(ذ	Employer (See Instructions	5)		
	Not Employe			Not Employed	_		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/09/2024	Kannenberg, Wade					\$3.00
		Contributor address; City; St	ate; Zip Code				
		Sherman, TX 75090					
	Principal occu	I pation / Job title (See Instructions)	3)	Employer (See Instructions	 ;)		
	Electronic te	chnician		Texas instruments			
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	08/24/2024	Keegan, Christine					\$150.00
		Contributor address; City; St	tate; Zip Code		1		
		Frisco, TX 75034					
	Principal occu	I pation / Job title (See Instructions	 S)	Employer (See Instructions	<u> </u> 5)		
	Not Employe			Not Employed			
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/11/2024 Keegan, Christine				\$125.00		
	Contributor address; City; State; Zip Code			1			
		Friend TY 75024					
	Drive sized apor	Frisco, TX 75034	<u></u>		Ĺ		
	Not Employe	pation / Job title (See Instructions	<i>i</i>)	Employer (See Instructions Not Employed	5)		
		.u		Νοι Επιριογέα			

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

6 Contributor address; City; State; Zip Code 7 Frisco, TX 75033 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#) Amount of Contribution (\$) 08/15/2024 Koster, Carla Contributor address; City; State; Zip Code Amount of Contribution (\$) 2 Allen, TX 75002 Employer (See Instructions) Amount of Contribution (\$) 7 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) 8 Full name of contributor out-of-state PAC (ID#) Amount of Contribution (\$) \$25.00 07/21/2024 Full name of contributor out-of-state PAC (ID#) Amount of Contribution (\$) \$25.00 07/21/2024 Full name of contributor out-of-state PAC (ID#) Amount of Contribution (\$) \$25.00 08/30/2024 Full name of contributor out-of-state PAC (ID#) Amount of Contribution (\$) \$35.00 08/30/2024 Full name of contributor out-of-state PAC (ID#) Amount of Contribution (\$) \$35.00 08/30/2024 Full name of contributor out-of-state PAC (ID#) </th <th>The Instruction Guide explains how to complete this form. Sch: 15/35 Rpt: 18/54 2 FILEE NAME 3 Filer ID (Ethics Commission Filers) 00088050 4 Date 5 Full name of contributor out-of-state PAC (Der</th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th>	The Instruction Guide explains how to complete this form. Sch: 15/35 Rpt: 18/54 2 FILEE NAME 3 Filer ID (Ethics Commission Filers) 00088050 4 Date 5 Full name of contributor out-of-state PAC (Der								
2 File R NAME 3 File rib (Ethics Commission Filers) 00080050 4 Date 5 Full name of contribution out-of-state PAC (Dir 001/5/2024 7 Amount of Contribution (S) 6 Contributor address; City; State; Zip Code 7 Amount of Contribution (S) \$20.00 7 Principal occupation / Job title (See Instructions) 9 Employer (See Instructione) Period Contribution (S) \$2152.00 08/15/2024 Full name of contributor out-of-state PAC (Dir Out-of-state PAC (Dir Principal occupation / Job title (See Instructione) Date Contributor address; City; State; Zip Code TEXAS URBAN LLVING \$125.00 9/12/2024 Full name of contributor out-of-state PAC (Dir Amount of Contribution (S) 9/12/2024 Full name of contributor out-of-state PAC (Dir Principal occupation / Job title (See Instructione) 07/21/2024 Full name of contributor out-of-state PAC (Dir Principal occupation / Job title (See Instructione) Not Employed Contributor address; City; State; Zip Code Principal occupation / Job title (See Instructione) Amount of Contribution (S) 9/10/2010/2024 Full name of contributor out-of-state PAC (Dir <	2 FileER NAME 3 Filer ID (Elhics Commission Filers) 3 Date 00080550 00080550 4 Date S Full mame of contribution out of state PAC (ID#) 7 Amount of Contribution (\$) 09/15/2024 Frisco, TX 75033 9 Employer (See Instructions) 7 Amount of Contribution (\$) 8 Principal occupation / 3db tills (See instructions) 9 Employer (See Instructions) Amount of Contribution (\$) 9 Employer (See Instructions) Part for anne of contribution out-d-state PAC (ID#	The Ir	nstru	ction Guide explains how	v to complete this f	form.	1		
Johnston, Chavva A. (Mrs.) 00088850 4 Date 09/15/2024 5 Pull name of contributor issue PAC (D# Knowles, Jenny 7 Amount of Contribution (\$) Frisco, TX 75033 \$ 20.00 8 Principal occupation / Job title (See Instructions) Proposal Writer 9 Employer (See Instructions) Dearborn Group Amount of Contribution (\$) S125/2024 Amount of Contribution (\$) Koster, Carla \$ 20.00 08/15/2024 Full name of contributor issue PAC (D# Allen, TX 75002 Participation (See Instructions) Contributor address; City, State: Zip Code Amount of Contribution (\$) S125.00 Principal occupation / Job title (See Instructions) Realtor Employer (See Instructions) TEXAS URBAN LIVING Amount of Contribution (\$) S125.00 Date 08/15/2024 Full name of contributor issue PAC (D# Allen, TX 75002 Amount of Contribution (\$) S25.00 \$ 25.00 Date 07/21/2024 Full name of contributor issue PAC (D# Employer (See Instructions) Not Employed Amount of Contribution (\$) S25.00 \$ 25.00 Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Amount of Contribution (\$) S35.00 Date 07/21/2024 Full name of contributor issue PAC (D# Employer (See Instructions) Not Employed Amount of Contribution (\$) S35.00 Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Amount of Contribution	Johnston, Chavva A. (Mrs.) 00088050 4 Date 09/15/2024 5 Full name of contributor I out-of-state PAC (De Frisco, TX 75033 7 Amount of Contribution (S) S20.00 8 Principal occupation / Job tite (See instructions) Proposal Writer 9 Employer (See Instructions) Dearborn Group Amount of Contribution (S) S125.00 08/15/2024 Full name of contributor out-of-state PAC (De Allen, TX 75002 Amount of Contribution (S) S125.00 Principal occupation / Job tite (See Instructions) Realtor Employer (See Instructions) TEXAS URBAN LIVING Amount of Contribution (S) S125.00 Date 08/15/2024 Full name of contributor out-of-state PAC (De Lauren, Nita Amount of Contribution (S) S25.00 Date 08/30/2024 Full name of contributor out-of-state PAC (De Contributor address; City; State; Zip Code Amount of Contribution (S) S25.00 Principal occupation / Job tite (See Instructions) Not Employed Employer (See Instructions) Not Employed Amount of Contribution (S) S35.00 Principal occupation / Job tite (See Instructions) Not Employed Employer (See Instructions) Not Employed Amount of Contribution (S) S35.00 Principal occupation / Job tite (See Instructions) Retired Full name of contributor out-of-state PAC (De Fisco, TX 75034 Amount of Contribution (S) Contributor address; City; State; Zip Code Fisco, TX 7504 Employer (See Instructions) Not Employed Amoun	2 FILER I	NAME				3	-	n Filers)
09/15/2024 Knowles, Jenny \$20.00 6 Contributor address; City; State; Zip Code \$20.00 7 Frisco, TX 75033 9 Employer (See Instructions) Dearborn Group 7 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 7 Principal occupation / Job title (See Instructions) Contributor address; City; State; Zip Code Amount of Contribution (\$) 7 Allen, TX 75002 Employer (See Instructions) Employer (See Instructions) 7 Full name of contributor out-ot-state PAC (Ibr; Amount of Contribution (\$) 7 Full name of contributor out-ot-state PAC (Ibr; Amount of Contribution (\$) 7 Full name of contributor out-ot-state PAC (Ibr; Amount of Contribution (\$) 7 Full name of contributor out-ot-state PAC (Ibr; Amount of Contribution (\$) 9 Full name of contributor out-ot-state PAC (Ibr; Amount of Contribution (\$) 9 Full name of contributor out-ot-state PAC (Ibr; Amount of Contribution (\$) 9 Full name of contributor out-ot-state PAC (Ibr; Amount of Contribution (\$) 9 Full name of contributor	09/15/2024 Knowles, Jenny \$20.00 6 Contributor address; City: State; Zip Code \$20.00 7 Principal occupation / Job tite (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID)::			navva A. (Mrs.)					,
 Contributor address; City; State; Zip Code Frisco, TX 75033 Principal occupation / Job title (See Instructions) Proposal Writer	6 Contributor address; City, State; Zip Code 7 Frisco, TX 75033 8 Principal occupation / Job title (See Instructions) Dearborn Group Date Full name of contributor out-of-state PAC (Der	4 Date		5 Full name of contributor	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
6 Contributor address: City: State: Zip Code 7 Frisco, TX 75033 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-ot-state PAC (Dot:	6 Contributor address; City; Slate; Zip Code 7 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Pull name of contributor out-of-state PAC (IDE:	09/15/2	2024						\$20.00
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (IDE Amount of Contribution (\$) \$125.00 08/15/2024 Koster, Carla Contributor address; City, State; Zip Code Amount of Contribution (\$) \$125.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) \$125.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) TEXAS URBAN LIVING Date Full name of contributor out-of-state PAC (IDE Amount of Contribution (\$) \$25.00 07/21/2024 L-Faustino, Alfred S25.00 S25.00 \$25.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$25.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$25.00 Not Employed Date Full name of contributor out-of-state PAC (IDE Amount of Contribution (\$) \$35.00 08/30/2024 Full name of contributor out-of-state PAC (IDE Amount of Contribution (\$) \$35.00 07/02/2024 Full name of contributor out-of-state PAC (IDE	8 Principal occupation / Job title (See Instructions) Proposal Writer 9 Employer (See Instructions) Dearborn Group Date Full name of contributor out-of-state PAC (ID#:) Koster, Carla Amount of Contribution (\$) \$125.00 Date Full name of contributor address; City, State; Zip Code Amount of Contribution (\$) Allen, TX 75002 \$125.00 Principal occupation / Job title (See Instructions) Realtor Employer (See Instructions) TEXAS URBAN LIVING Amount of Contribution (\$) \$25.00 Date Full name of contributor out-of-state PAC (ID#:) (Contributor address; City, State; Zip Code Amount of Contribution (\$) \$25.00 Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Amount of Contribution (\$) \$25.00 Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Amount of Contribution (\$) \$35.00 Ob/30/2024 Full name of contributor out-of-state PAC (ID#:) Not Employed Amount of Contribution (\$) \$35.00 Principal occupation / Job title (See Instructions) Retired Full name of contributor out-of-state PAC (ID#:) Not Employed Amount of Contribution (\$) \$35.00 Date Full name of contributor out-of-state PAC (ID#:) Not Employed Amount of Contribution (\$) \$35.00 </td <td></td> <td></td> <td></td> <td></td> <td></td> <td>1</td> <td></td> <td></td>						1		
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Not Employed Not Employed Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 08/30/2024 Laursen, Nita \$35.00 Contributor address; City; State; Zip Code Frisco, TX 75034 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Retired Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 07/02/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 07/02/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) (Contributor address; City; State; Zip Code Katy, TX 77449-7504 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions)	Not Employed Not Employed Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 08/30/2024 Laursen, Nita \$35.00 Contributor address; City; State; Zip Code Frisco, TX 75034 \$35.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Retired Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 07/02/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 07/02/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Katy, TX 77449-7504 Employer (See Instructions) \$5.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$5.00			Frisco, TX 75036-1039					
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 08/30/2024 Laursen, Nita \$35.00 Contributor address; City; State; Zip Code Frisco, TX 75034 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Out-of-state PAC (ID#:) Date Full name of contributor O7/02/2024 Full name of contributor Contributor address; City; State; Zip Code Amount of Contribution (\$) State Full name of contributor O7/02/2024 Full name of contributor Katy, TX 77449-7504 Contributor address; City; State; Zip Code Principal occupation / Job title (See Instructions) Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions)	Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 08/30/2024 Laursen, Nita \$35.00 Contributor address; City; State; Zip Code Frisco, TX 75034 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Full name of contributor out-of-state PAC (ID#:) Date Full name of contributor out-of-state PAC (ID#:) O7/02/2024 Full name of contributor out-of-state PAC (ID#:) O7/02/2024 Full name of contributor out-of-state PAC (ID#:) Katy, TX 77449-7504 Katy, TX 77449-7504 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions)	Principa	al occu	pation / Job title (See Instructions	s)	Employer (See Instructions	5)		
08/30/2024 Laursen, Nita \$35.00 Contributor address; City; State; Zip Code \$35.00 Frisco, TX 75034 Employer (See Instructions) Retired Full name of contributor Date Full name of contributor 07/02/2024 Full name of contributor 07/02/2024 Full name of contributor Katy, TX 77449-7504 Amount of Contribution (\$) Principal occution / Job title (See Instructions) \$5.00 Principal occution / Job title (See Instructions) Employer (See Instructions) Principal occution / Job title (See Instructions) Employer (See Instructions) Principal occution / Job title (See Instructions) Employer (See Instructions)	08/30/2024 Laursen, Nita \$35.00 Contributor address; City; State; Zip Code Frisco, TX 75034 Principal occ∪tion / Job title (See Instructions) Employer (See Instructions) Retired Full name of contributor out-of-state PAC (ID#:) Date Full name of contributor out-of-state PAC (ID#:) 07/02/2024 Lemmond, byron S5.00 Contributor address; City; State; Zip Code Amount of Contribution (\$) Katy, TX 77449-7504 Employer (See Instructions) Principal occ∪tion / Job title (See Instructions) Employer (See Instructions)	Not En	nploye	:d		Not Employed			
Contributor address; City; State; Zip Code Frisco, TX 75034 Principal occupation / Job title (See Instructions) Retired Date Full name of contributor O7/02/2024 Lemmond, byron Contributor address; City; State; Zip Code Katy, TX 77449-7504 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Full name of contributor Other Contributor address; City; State; Zip Code Katy, TX 77449-7504 Principal occupation / Job title (See Instructions) Employer (See Instructions)	Contributor address; City; State; Zip Code Frisco, TX 75034 Principal occupation / Job title (See Instructions) Retired Date Full name of contributor 001/02/2024 Lemmond, byron Contributor address; City; State; Zip Code Katy, TX 77449-7504 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Not Employed	Date		Full name of contributor	out-of-state PAC (ID#:	<u> </u>	Γ	Amount of Contribution (\$)	
Contributor address; City; State; Zip Code Frisco, TX 75034 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Full name of contributor out-of-state PAC (ID#:) Date Full name of contributor out-of-state PAC (ID#:) 07/02/2024 Lemmond, byron Contributor address; City; State; Zip Code Amount of Contribution (\$) Katy, TX 77449-7504 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions)	Contributor address; City; State; Zip Code Frisco, TX 75034 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Full name of contributor out-of-state PAC (ID#:) Date Full name of contributor out-of-state PAC (ID#:) Lemmond, byron Lemmond, byron Contributor address; City; State; Zip Code Amount of Contribution (\$) Katy, TX 77449-7504 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions)	08/30/2	2024						\$35.00
Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Not Employed Date Full name of contributor out-of-state PAC (ID#:) 07/02/2024 Lemmond, byron Contributor address; City; State; Zip Code \$5.00 Katy, TX 77449-7504 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions)	Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Not Employed Date Full name of contributor out-of-state PAC (ID#:) 07/02/2024 Lemmond, byron Contributor address; City; State; Zip Code \$5.00 Katy, TX 77449-7504 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions)						1		
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Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Not Employed Date Full name of contributor out-of-state PAC (ID#:) 07/02/2024 Lemmond, byron Contributor address; City; State; Zip Code \$5.00 Katy, TX 77449-7504 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions)	Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Not Employed Date Full name of contributor out-of-state PAC (ID#:) 07/02/2024 Lemmond, byron Contributor address; City; State; Zip Code \$5.00 Katy, TX 77449-7504 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions)								
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07/02/2024 Lemmond, byron \$5.00 Contributor address; City; State; Zip Code Katy, TX 77449-7504 Principal occupation / Job title (See Instructions) Employer (See Instructions)	07/02/2024 Lemmond, byron \$5.00 Contributor address; City; State; Zip Code Katy, TX 77449-7504 Principal occupation / Job title (See Instructions) Employer (See Instructions)		u				T		
Contributor address; City; State; Zip Code Katy, TX 77449-7504 Principal occupation / Job title (See Instructions) Employer (See Instructions)	Contributor address; City; State; Zip Code Katy, TX 77449-7504 Principal occupation / Job title (See Instructions) Employer (See Instructions)		2024		out-of-state PAC (ID#:_)		Amount of Contribution (\$)	ቀ5 በበ
Katy, TX 77449-7504 Principal occupation / Job title (See Instructions) Employer (See Instructions)	Katy, TX 77449-7504 Principal occupation / Job title (See Instructions) Employer (See Instructions)	011021				ł		Φ0.00	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	Principal occupation / Job title (See Instructions) Employer (See Instructions)			Contributor address, City, 5	tate; Zip Code				
Principal occupation / Job title (See Instructions) Employer (See Instructions)	Principal occupation / Job title (See Instructions) Employer (See Instructions)								
Principal occupation / Job title (See Instructions) Employer (See Instructions)	Principal occupation / Job title (See Instructions) Employer (See Instructions)			Katy, TX 77449-7504					
		Principa	al occu	-	s)	Employer (See Instructions	<u>і</u> 5)		
		-					-		
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	The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 16/35 Rpt: 19/54	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Johnston, Cl	havva A. (Mrs.)				00088050	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	08/02/2024	Lemmond, byron	—				\$5.00
		6 Contributor address; City; Sta	ate; Zip Code		1		
		Katy, TX 77449-7504					
		pation / Job title (See Instructions)	I	9 Employer (See Instructions	5)		
	Not Employe	•		Not Employed	.		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/02/2024	Lemmond, byron					\$7.00
		Contributor address; City; Sta					
		Katy, TX 77449-7504					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ເ)		
	Not Employe		I	Not Employed	2)		
_	Date	Full name of contributor			Γ	Amount of Contribution (\$)	
	07/09/2024	Levin, Dan	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$500.00
		Contributor address; City; Sta	ate: Zin Code				Ψ000.00
		Contributor audicess, City, Sta					
		Frisco, TX 75035					
	Principal occu	pation / Job title (See Instructions)	(Employer (See Instructions	5)		
	CEO			Raptor Restoration			
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	09/23/2024	Ligon, Jerry					\$75.00
		Contributor address; City; Sta	ate; Zip Code		1		
		Aubrow TV 76227					
	Dringing occu	Aubrey, TX 76227 Ipation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Not Employe	,	I	Not Employed	5)		
⊨		•			1	Array of Cantribution (ft)	
	Date 08/14/2024	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$25.00
	Contributor address; City; State; Zip Code				Ψ20.00		
		Contributor dualess, City, Sta	ile; zip code				
		McKinney, TX 75072					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Not Employe	ed	I	Not Employed			
				<u> </u>			

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 17/35 Rpt: 20/54	
2 FILER NAME			3 Filer ID (Ethics Commission Filers	rs)
	havva A. (Mrs.)		00088050	- /
4 Date	5 Full name of contributor out-of-state PAC (ID#	t:)	7 Amount of Contribution (\$)	
07/25/2024	Lushbaugh, Janet		\$1	15.00
	6 Contributor address; City; State; Zip Code			
	Frisco, TX 75036			
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	·)	
Not Employe	ed	Not Employed		
Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)	
08/14/2024	Maddren, Carol			10.00
	Frisco, TX 75035			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	
Scrum maste	er	Usaa		
Date	Full name of contributor out-of-state PAC (ID#	t:)	Amount of Contribution (\$)	
08/31/2024	Magee, Lisa		\$5	50.00
	Contributor address; City; State; Zip Code			
	The Colony, TX 75056			
	upation / Job title (See Instructions)	Employer (See Instructions)	
СРА		USDG		
Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)	
09/10/2024	Magee, Lisa		\$12	25.00
	Contributor address; City; State; Zip Code			
	The Colony, TX 75056			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions		
CPA		Self		
Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)	
09/20/2024	Magee, Lisa		\$3	30.00
	Contributor address; City; State; Zip Code			
	The Colony, TX 75056			
	upation / Job title (See Instructions)	Employer (See Instructions)	
CPA		Self		

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	The Instru	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 18/35 Rpt: 21/54	
2	FILER NAME			3	Filer ID (Ethics Commissio	n Filers)
		navva A. (Mrs.)			00088050	/
4	Date	5 Full name of contributor out-of-state PAC (IE)#:)	7	Amount of Contribution (\$)	
	09/22/2024	Mallet, Penny				\$125.00
		6 Contributor address; City; State; Zip Code		1		
		Lewisville, TX 75077				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Not Employe	d	Not Employed			
	Date	Full name of contributor 🔲 out-of-state PAC (IE)#:)		Amount of Contribution (\$)	
	08/16/2024	Mangarelli, Catherine				\$25.00
		Contributor address; City; State; Zip Code		1		
		Aubrey, TX 76227				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	d	Not Employed			
	Date	Full name of contributor out-of-state PAC (IE	0#:)		Amount of Contribution (\$)	
	09/26/2024	Matthews, Jeremy				\$50.00
		Contributor address; City; State; Zip Code		1		
		Plano, TX 75025	-			
	•	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	d	Not Employed			
	Date	Full name of contributor 🔲 out-of-state PAC (IE)#:)		Amount of Contribution (\$)	
	09/11/2024	Mays Development Group				\$100.00
		Contributor address; City; State; Zip Code		1		
		New Orleans, LA 70114				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor 🔲 out-of-state PAC (IE)#:)	Γ	Amount of Contribution (\$)	
	08/22/2024	McClendon, Jadzia D				\$10.00
		Contributor address; City; State; Zip Code		1		
		Colorado Springs, CO 80910				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	d	Not Employed			

The Instru	iction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 19/35 Rpt: 22/54	
2 FILER NAME			3 Filer ID (Ethics Commission F	ilers)
	chavva A. (Mrs.)		00088050	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
07/02/2024				\$35.00
	6 Contributor address; City; State; Zip Code			
	Wylie, TX 75098			
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	<u></u>	
Not Employe		Not Employed	"	
Date			Amount of Contribution (\$)	
09/09/2024	McDorman, Sharon)		\$35.00
0310312024				φου.υυ
	Contributor address; City; State; Zip Code			
	Wylie, TX 75098			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ۶)	
retired teach	her	retired teacher		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
08/09/2024	Montes, Noel			\$50.00
	Contributor address; City; State; Zip Code			
	Little Elm, TX 75068	-		
-	upation / Job title (See Instructions)	Employer (See Instructions	3)	
Auto Adjuste	er	Progressive		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
08/09/2024	Murray, Ashley			\$75.00
	Contributor address; City; State; Zip Code			
	Lavon, TX 75166			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> ۶)	
Homemaker	ſ	Homemaker	,	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
08/23/2024	Newport, Anna			\$10.00
	Contributor address; City; State; Zip Code			
	The Colony, TX 75056			
-	upation / Job title (See Instructions)	Employer (See Instructions	3)	
Web develop	per	Fieldroutes		
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The Instru	ction Guide explains how to complete this f	form	1 Total pages Schedule A1:
		0111.	Sch: 20/35 Rpt: 23/54
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	havva A. (Mrs.)		00088050
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
07/26/2024			\$25.00
	6 Contributor address; City; State; Zip Code		
	Frisco, TX 75034		
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	;)
Teacher		LISD	
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)
07/06/2024	O'Reilly, Debbie		\$35.00
	Contributor address; City; State; Zip Code		
Princinal occu	PLANO, TX 75025 upation / Job title (See Instructions)	Employer (See Instructions	<u></u>
Teacher		Plano ISD	')
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)
08/12/2024	O'Reilly, Debbie	/	\$10.00
	Contributor address; City; State; Zip Code		
	PLANO, TX 75025		
	upation / Job title (See Instructions)	Employer (See Instructions	;)
Teacher		Plano ISD	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
08/27/2024	O'Reilly, Debbie		\$125.00
	Contributor address; City; State; Zip Code		
	PLANO, TX 75025		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)
Teacher		Plano ISD	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/06/2024	O'Reilly, Debbie		\$35.00
	Contributor address; City; State; Zip Code		
	PLANO, TX 75025		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u></u>
Teacher		Plano ISD	ע

	The Instruction Guide explains how to complete this form.					Total pages Schedule A1: Sch: 21/35 Rpt: 24/54	
2	2 FILER NAME				3	Filer ID (Ethics Commission	n Filers)
		navva A. (Mrs.)				00088050	
4	Date	5 Full name of contributor out-c	of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	08/14/2024	Paul, Shay					\$31.00
		6 Contributor address; City; State; Zip (Code				
		The Colony, TX 75056					
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions	()		
		Not Employed Not Employed					
	Date	Full name of contributor out-o	of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/26/2024	Perkins, Paula					\$25.00
		Contributor address; City; State; Zip (
		Frisco, TX 75034					
	-	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Not Employe	⁽ d		Not Employed			
	Date		of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/06/2024	Perkins, Paula					\$25.00
	Contributor address; City; State; Zip Code						
		Frisco, TX 75036					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Not Employe	,		Not Employed	,		
⊨	Date	Full name of contributor	of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/16/2024	Perry, Julie					\$25.00
		Contributor address; City; State; Zip (Code				
		McKinney, TX 75069					
	•	pation / Job title (See Instructions)		Employer (See Instructions)		
	Sales			Hear.com			
	Date		of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/26/2024	Peña, Clelia					\$50.00
		Contributor address; City; State; Zip (Code				
		Richardson, TX 75082					
⊢	Princinal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Teacher			Richardson ISD	9		
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The Instruc	ction Guide explains how to comp	lete this form.	1	Total pages Schedule A1: Sch: 22/35 Rpt: 25/54	
2 FILER NAME			3	Filer ID (Ethics Commission	n Filers)
Johnston, Ch	navva A. (Mrs.)			00088050	
4 Date	5 Full name of contributor out-of-sta	ate PAC (ID#:)	7	Amount of Contribution (\$)	
09/25/2024	Philipose, Sandy				\$50.00
	6 Contributor address; City; State; Zip Cod	de			
2 Dringingloggy	Prosper, TX 75078	C - E-malayor (Cap Instructi	<u> </u>		
8 Principal occul Professor	pation / Job title (See Instructions)	9 Employer (See Instruction Austin College	ons)		
Date		ate PAC (ID#:)		Amount of Contribution (\$)	* 50.00
09/15/2024					\$50.00
	Contributor address; City; State; Zip Cod	le			
	Frisco, TX 75036				
Principal occu	pation / Job title (See Instructions)	Employer (See Instruction)		
Not Employe		Not Employed	01157		
				Amount of Contribution (f)	
Date 09/11/2024		ate PAC (ID#:)		Amount of Contribution (\$)	\$125.00
09/11/2024		do			ΦΤζΟ.00
	Contributor address; City; State; Zip Code				
	Frisco, TX 75034				
Principal occu	I pation / Job title (See Instructions)	Employer (See Instruction	ons)		
Client Execu	, , ,	Tyler Technologies			
Date	Full name of contributor out-of-sta	ate PAC (ID#:)	\neg	Amount of Contribution (\$)	
09/25/2024	Renzenbrink, Roy				\$50.00
	Contributor address; City; State; Zip Cod	de			
	Frisco, TX 75035				
Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ons)		
Not Employe	:d	Not Employed			
Date	Full name of contributor	ate PAC (ID#:)		Amount of Contribution (\$)	
08/18/2024	Reveles, Debbie				\$25.00
	Contributor address; City; State; Zip Cod	le			
	Frisco, TX 75033				
-	pation / Job title (See Instructions)	Employer (See Instruction	ons)		
Not Employe	:d	Not Employed			

Johnston, Chavva A. (Mrs.) 4 Date 07/19/2024 5 Full name of contributor out-of-state PAC (ID#:) 07/19/2024 6 Contributor address; City; State; Zip Code Frisco, TX 75036 00088050 7 Amount of Contribution (\$) \$75.00 Frisco, TX 75036				
Johnston, Chavva A. (Mrs.) 00088050 4 Date 07/19/2024 5 Full mame of contributor out-of-state PAC (Det	The Instruction Guide explains how to complete this form.			
Johnston, Chavva A. (Mrs.) 00088050 4 Date 5 Full name of contribution out-of-state PAC (D#) 7 Amount of Contribution (\$) 07/19/2024 Frisco, TX 75036 9 Employer (See Instructions) 7 Amount of Contribution (\$) 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of Contribution (\$) 07/24/2024 Full name of contributor out-of-state PAC (D#) Amount of Contribution (\$) 07/24/2024 Full name of contributor out-of-state PAC (D#) Amount of Contribution (\$) 07/24/2024 Full name of contributor out-of-state PAC (D#) Amount of Contribution (\$) 08/24/2024 Full name of contributor out-of-state PAC (D#) Amount of Contribution (\$) 08/24/2024 Full name of contributor out-of-state PAC (D#) Amount of Contribution (\$) 07/202024 Full name of contributor out-of-state PAC (D#) Amount of Contribution (\$) 07/202024 Full name of contributor out-of-state PAC (D#) Amount of Contribution (\$) 07/202024 Full name of contributor out-of-state PAC (D#) Amount of Contribution (\$) 07/202024 Full name of contri	2 FILER NAME	3	Filer ID (Ethics Commissio	n Filers)
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6 Contributor address; City, State; Zip Code Frisco, TX 75036 Frisco, TX 75036 8 Principal occupation / Job titie (See Instructions) Not Employed Not Employed Date 07/24/2024 Full name of contributor out-ot-state PAC (DII:) Contributor address; City, State; Zip Code Amount of Contribution (\$) Principal occupation / Job titie (See Instructions) TGSE Employer (See Instructions) TGSE Amount of Contribution (\$) Date 08/24/2024 Full name of contributor out-of-state PAC (DII:) TGSE Amount of Contribution (\$) Principal occupation / Job titie (See Instructions) TGSE Employer (See Instructions) TGSE Amount of Contribution (\$) Principal occupation / Job titie (See Instructions) TGSE Employer (See Instructions) TGSE Amount of Contribution (\$) Principal occupation / Job titie (See Instructions) TGSE Employer (See Instructions) TGSE Amount of Contribution (\$) Date 07/20/2024 Full name of contributor out-of-state PAC (DII:	4 Date 5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
				\$75.00
8 Principal occupation / Job title (See Instructions) Not Employed 9 Employed (See Instructions) Not Employed Date 07/24/2024 Full name of contributor Ringness, Jesse Contributor address; City, State; Zip Code Amount of Contribution (\$) Principal occupation / Job title (See Instructions) TGSE Employer (See Instructions) TGSE Amount of Contribution (\$) Date 08/24/2024 Full name of contributor Ringness, Jesse Contributor address; City, State; Zip Code Amount of Contribution (\$) Principal occupation / Job title (See Instructions) TGSE Employer (See Instructions) TGSE Amount of Contribution (\$) Principal occupation / Job title (See Instructions) TGSE Full name of contributor out-of-state PAC (ID#) Ringness, Jesse Contributor address; City, State; Zip Code Amount of Contribution (\$) Principal occupation / Job title (See Instructions) TGSE Employer (See Instructions) TGSE Amount of Contribution (\$) Date 07/20/2024 Full name of contributor Frisco, TX 75036 Employer (See Instructions) retired Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Contributor address; City, State; Zip Code Thicolal occupation / Job title (See Instructions) Contributor address; City, State; Zip Code The Colony, TX 75056 Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Sti00.00 </td <td></td> <td></td> <td></td> <td></td>				
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Principal occupation / Job title (See Instructions) Employer (See Instructions)	Contributor address; City; State; Zip Code			
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	The Colony, TX 75056			
Customer Solutions Sales Manager Ericsson	Principal occupation / Job title (See Instructions) Employer (See Instructions)	ions)		
	Customer Solutions Sales Manager Ericsson			

	The Instru	ction Guide explains how to	complete this fo	orm.	1	Total pages Schedule A1: Sch: 24/35 Rpt: 27/54	
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4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/07/2024	Schneyer, Sean					\$375.00
	ļ	6 Contributor address; City; State;	; Zip Code		1		
	ļ						
		The Colony, TX 75056					
8	Principal occu	pation / Job title (See Instructions)	T	9 Employer (See Instructions	1 5)		
		blutions Sales Manager		Ericsson			
⊨	Date	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/12/2024	Scrogginthorpe, Liz		/		/ incunt of Continuation (+)	\$25.00
		Contributor address; City; State;	· 7in Code				* -
	ļ		, 200 0000				
	ļ						
	1	Richardson, TX 75080					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Product Desi	gner		Bioworld			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/14/2024	Sears, Chris					\$45.00
	Contributor address; City; State; Zip Code						
	ļ						
		Frisco, TX 75034					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>ا</u> ټ)		
	Not Employe			Not Employed	,		
╞	Date	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	08/14/2024	Shalda, Bernadette					\$25.00
			e; Zip Code				
	ł		•				
	ſ						
	1	Frisco, TX 75036					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Operations A	nalyst		Harmon			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/14/2024	Shapiro, Taryn Shapiro					\$25.00
	Contributor address; City; State; Zip Code						
	ļ						
		The Colony, TX 75056	T		Ĺ		
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Executive As	sistant	Equitable Advisors				

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 25/35 Rpt: 28/54	
2 FILER NAME			3 Filer ID (Ethics Commission Fi	ilers)
	havva A. (Mrs.)		00088050	liore,
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
07/30/2024	Skelton, Cheryl			\$6.00
	6 Contributor address; City; State; Zip Code			
	Lewisville, TX 75077			
	upation / Job title (See Instructions)	9 Employer (See Instructions	\$)	
Accounting		Taco Bueno Corp		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
08/30/2024	Skelton, Cheryl			\$6.00
	Contributor address; City; State; Zip Code			
	Lewisville, TX 75077			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	\$)	
Accounting		Taco Bueno Corp		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
08/14/2024	Smith, Camille			\$25.00
	Contributor address; City; State; Zip Code			
	Parker, TX 75002			
	upation / Job title (See Instructions)	Employer (See Instructions	3)	
Not Employe	ed	Not Employed		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/22/2024	Smith, David			\$10.00
	Contributor address; City; State; Zip Code		1	
- · · · · · · · · · · · · · · · · · · ·	Plano, TX 75075	1		
	upation / Job title (See Instructions)	Employer (See Instructions	\$)	
Political Con		self		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
08/22/2024	Smith, David			\$10.00
	Contributor address; City; State; Zip Code			
	Diana TV 75075			
Driv single age	Plano, TX 75075		Į	
	upation / Job title (See Instructions)	Employer (See Instructions	\$)	
Political Con		self		
1				

The Instru	iction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 26/35 Rpt: 29/54	
2 FILER NAME			3 Filer ID (Ethics Commission Fil	lers)
	chavva A. (Mrs.)		00088050	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
09/22/2024	Smith, David			\$10.00
	6 Contributor address; City; State; Zip Code			
	Plano, TX 75075			
	upation / Job title (See Instructions)	9 Employer (See Instructions))	
Political Co	nsultant	self		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/26/2024				\$25.00
	Contributor address; City; State; Zip Code			
	Frisco, TX 75035			
	upation / Job title (See Instructions)	Employer (See Instructions))	
Not Employ	ed	Not Employed		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
08/28/2024				\$20.24
	Contributor address; City; State; Zip Code			
	Friend TV 75025			
Dringing occ	Frisco, TX 75035	Employer (Soo Instructions)		
Not Employ	upation / Job title (See Instructions) ed	Employer (See Instructions) Not Employed)	
Date)	Amount of Contribution (\$)	<u> </u>
08/01/2024	Stephens, Fran			\$10.00
	Contributor address; City; State; Zip Code			
	Little Elm, TX 75068			
Principal occi	upation / Job title (See Instructions)	Employer (See Instructions))	
Not Employ	ed	Not Employed		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/25/2024				\$25.00
	Contributor address; City; State; Zip Code			
	Frisco, TX 75036			
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions))	
retired				
		·		

The Instru	ction Guide explains how to	complete this f	orm.	1 Total pages Schedule A1: Sch: 27/35 Rpt: 30/54	
2 FILER NAME				3 Filer ID (Ethics Commission	n Filers)
	havva A. (Mrs.)			00088050	,
4 Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
07/01/2024	Swan, Sandy				\$50.00
	6 Contributor address; City; State	e; Zip Code			
	Denton, TX 76209				
-	ipation / Job title (See Instructions)		9 Employer (See Instructions))	
Case Worke			IFM		
Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)	÷=0.00
08/01/2024					\$50.00
	Contributor address; City; State	;; Zip Code			
	Denton, TX 76209				
Princinal occu	pation / Job title (See Instructions)		Employer (See Instructions)	<u>)</u>	
Case Worke		1	IFM)	
Date	Full name of contributor	out-of-state PAC (ID#:	<u> </u>	Amount of Contribution (\$)	
09/01/2024	Swan, Sandy	טעו-טו-זגמופ דאס נוטיי	/		\$50.00
00/01/202	Contributor address; City; State; Zip Code				400.01
	Contributor address, Sity, Calls	, Zip 0000			
	Denton, TX 76209				
	pation / Job title (See Instructions)		Employer (See Instructions))	
Case Worke	r		IFM		
Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
09/26/2024	Swanson, Lynn				\$125.00
	Contributor address; City; State				
	Frisco, TX 75034				
Principal occu	Ipation / Job title (See Instructions)		Employer (See Instructions)	N	
Not Employe		1	Not Employed)	
		1		Amount of Contribution (ft)	
Date 08/24/2024	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)	\$106.00
0012412024					Φ100.00
	Contributor address; City; State	; Zip Coue			
	Frisco, TX 75034				
Principal occu	I pation / Job title (See Instructions)	i	Employer (See Instructions))	
Not Employe	be		Not Employed		
			1		

					-		
	The Instru	ction Guide explains how	i to complete this f	orm.	1	Total pages Schedule A1: Sch: 28/35 Rpt: 31/54	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
	Johnston, Cl	havva A. (Mrs.)				00088050	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	08/05/2024	Texas Democratic Womer	 n				\$1,000.00
		6 Contributor address; City; St	ate; Zip Code				
_	<u></u>	Austin, TX 78703	<u> </u>	1 <u>-</u> - , , , , , , , , , , , , , , , , , ,	Ļ		
8	Principal occu	pation / Job title (See Instructions))	9 Employer (See Instructions	;)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	07/21/2024	Thomas, Richard					\$25.00
		Contributor address; City; Sta					
	Dringing oppu	Frisco, TX 75036			Ĺ		
	Not Employe	pation / Job title (See Instructions))	Employer (See Instructions Not Employed)		
					_		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	ቀርብ በብ
	07/25/2024 Thomas, Richard						\$50.00
	Contributor address; City; State; Zip Code						
		Frisco, TX 75036					
	Principal occu	pation / Job title (See Instructions)	;)	Employer (See Instructions	;)		
	Not Employe)d		Not Employed			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	07/25/2024	Thomas, Richard	_				\$50.00
		Contributor address; City; Sta	ate; Zip Code				
	Dringing oog	Frisco, TX 75036			Ĺ		
	Not Employe	pation / Job title (See Instructions))	Employer (See Instructions Not Employed	9		
							
	Date 08/14/2024	Full name of contributor Thompsom, Monique	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$25.00
	00/14/2024		total Zia Cada				φ20.00
		Contributor address; City; Sta	ate; Zip Code				
		Little Elm, TX 75068					
	Principal occu	I pation / Job title (See Instructions)	;)	Employer (See Instructions	;)		
	Therapist			Self employed			
				1			

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

The Instru	iction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: Sch: 30/35 Rpt: 33/54	
2 FILER NAME		3 Filer ID (Ethics Commission	n Filers)	
	Chavva A. (Mrs.)		00088050	·
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
09/06/2024				\$400.00
	6 Contributor address; City; State; Zip Code			
	Frisco, TX 75036	1	<u> </u>	
8 Principal occu Not Employe	upation / Job title (See Instructions)	 9 Employer (See Instructions) Not Employed)	
Date)	Amount of Contribution (\$)	* 25 00
08/15/2024				\$25.00
	Contributor address; City; State; Zip Code			
	Frisco, TX 75035			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))	
Executive As		МНВТ	, 	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
09/12/2024	Tookey, Beverly			\$50.00
	Denton, TX 76205			
	upation / Job title (See Instructions)	Employer (See Instructions))	
Not Employe	əd	Not Employed		
Date)	Amount of Contribution (\$)	
09/14/2024	Tuck, Rebecca			\$25.00
	Contributor address; City; State; Zip Code			
	Providence Village, TX 76227			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))	
Csam		Microsoft	'	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
09/11/2024	Tysell, Ken		.,	\$100.00
	Contributor address; City; State; Zip Code			
	Frisco, TX 75033			
-	upation / Job title (See Instructions)	Employer (See Instructions))	
Director		AT&T		

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: Sch: 31/35 Rpt: 34/54 2 FILER NAME Johnston, Chavva A. (Mrs.) 3 Filer ID (Ethics Commission Filers 00088050 4 Date 07/21/2024 5 Full name of contributor out-of-state PAC (ID#:) Van Alstyne, Constancw 7 Amount of Contribution (\$) 6 Contributor address; City; State; Zip Code Frisco, TX 75036 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Retired 9 Employer (See Instructions) Amount of Contribution (\$) 09/09/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$7! Principal occupation / Job title (See Instructions) Retired 9 Employer (See Instructions) Amount of Contribution (\$) \$7! 09/09/2024 Full name of contributor out-of-state PAC (ID#:) Johnson&Johnson Amount of Contribution (\$) \$7! Principal occupation / Job title (See Instructions) Engineer Employer (See Instructions) Johnson&Johnson \$7! Date Full name of contributor
Johnston, Chavva A. (Mrs.) 00088050 4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Amount of Contribution (\$) 07/21/2024 5 Contributor address; City; State; Zip Code 7 Amount of Contribution (\$) \$29 6 Contributor address; City; State; Zip Code Frisco, TX 75036 9 Employer (See Instructions) \$29 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/09/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 9 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$79 9 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$79 9 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$79 9 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$79 9 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$79 9 Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
Johnston, C+vva A. (Mrs.) 00088050 4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Amount of Contribution (\$) 9 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of Contribution (\$) 9 Pate Full name of contributor Out-of-state PAC (ID#:) Amount of Contribution (\$) 9 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of Contribution (\$) 9 Pate Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 9 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of Contribution (\$) 9 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) 9 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) 9 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) 9 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) <
07/21/2024 Van Alstyne, Constancw \$23 6 Contributor address; City; State; Zip Code \$24 6 Contributor address; City; State; Zip Code \$25 7 Frisco, TX 75036 9 8 Principal occupation / Job title (See Instructions) Retired 9 Employer (See Instructions) 0 Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 0 9/09/2024 Van Hoff, Juliette Amount of Contribution (\$) Frisco, TX 75033 Frisco, TX 75033 Employer (See Instructions) Dotnson&Johnson Employer (See Instructions) Johnson&Johnson Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$)
6 Contributor address; City; State; Zip Code Frisco, TX 75036 8 Principal occupation / Job title (See Instructions) Retired Date Full name of contributor Og/09/2024 Full name of contributor Van Hoff, Juliette Amount of Contribution (\$) Van Hoff, Juliette S7! Contributor address; City; State; Zip Code Amount of Contribution (\$) Frisco, TX 75033 Employer (See Instructions) For incipal occupation / Job title (See Instructions) Engineer Date Full name of contributor out-of-state PAC (ID#:
6 Contributor address; City; State; Zip Code Frisco, TX 75036 Frisco, TX 75036 8 Principal occupation / Job title (See Instructions) Retired 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Van Hoff, Juliette Van Hoff, Juliette S75 Contributor address; City; State; Zip Code Frisco, TX 75033 Principal occupation / Job title (See Instructions) Engineer Employer (See Instructions) Johnson&Johnson Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Employer (See Instructions) Johnson&Johnson
8 Principal occupation / Job title (See Instructions) Retired 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/09/2024 Van Hoff, Juliette
8 Principal occupation / Job title (See Instructions) Retired 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/09/2024 Van Hoff, Juliette
8 Principal occupation / Job title (See Instructions) Retired 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/09/2024 Van Hoff, Juliette
Retired Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$78 09/09/2024 Van Hoff, Juliette Contributor address; City; State; Zip Code Amount of Contribution (\$) \$78 Contributor address; City; State; Zip Code Frisco, TX 75033 Employer (See Instructions) \$79 Principal occuration / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) \$79 Engineer Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$79 Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$79
09/09/2024 Van Hoff, Juliette \$75 Contributor address; City; State; Zip Code \$75 Frisco, TX 75033 Frisco, TX 75033 Principal occuration / Job title (See Instructions) Employer (See Instructions) Engineer Johnson&Johnson Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
Contributor address; City; State; Zip Code Frisco, TX 75033 Principal occuration / Job title (See Instructions) Engineer Date Full name of contributor Out-of-state PAC (ID#:) Amount of Contribution (\$)
Contributor address; City; State; Zip Code Frisco, TX 75033 Principal occupation / Job title (See Instructions) Employer (See Instructions) Engineer Johnson&Johnson Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instructions) Engineer Johnson&Johnson Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instructions) Engineer Johnson&Johnson Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instructions) Engineer Johnson&Johnson Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
Engineer Johnson&Johnson Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
I 09/15/2024 I Voorn Pamela to the state of
Contributor address; City; State; Zip Code
Frisco, TX 75036
Principal occupation / Job title (See Instructions) Employer (See Instructions)
Not Employed Not Employed
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
07/23/2024 Waddell, Chris \$2
Contributor address; City; State; Zip Code
Frisco, TX 75036
Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Not Employed
Not Employed
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
08/22/2024 Waddell, Chris \$10
08/22/2024 Waddell, Chris \$10
08/22/2024 Waddell, Chris \$10
08/22/2024 Waddell, Chris Contributor address; City; State; Zip Code
08/22/2024 Waddell, Chris Contributor address; City; State; Zip Code Frisco, TX 75036

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The Instruc	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 32/35 Rpt: 35/54	
2 FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	navva A. (Mrs.)				00088050	,
4 Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
09/09/2024	Waddell, Chris					\$125.00
	6 Contributor address; City; Sta	te; Zip Code		1		
	Frisco, TX 75034	1				
	pation / Job title (See Instructions)		9 Employer (See Instructions	s)		
HR			Self			
Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)	
08/14/2024	Walker, Marissa					\$50.00
	Contributor address; City; Sta			1		
	Mckinney, TX 75071	1				
	pation / Job title (See Instructions)		Employer (See Instructions			
VP of Comm	unications		ENT Specialty Partners			
Date	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
08/14/2024	Walker, Marissa					\$50.00
	Contributor address; City; State; Zip Code					
	Allen, TX 75013	1				
	pation / Job title (See Instructions)		Employer (See Instructions			
Communicat	ions Director		Dallas County Dental So		ety	
Date	Full name of contributor	out-of-state PAC (ID#:)	Ţ	Amount of Contribution (\$)	
07/25/2024	Walker Jr., James					\$50.00
	Contributor address; City; Sta	te; Zip Code]		
	Frisco, TX 75036			Ĺ		
	pation / Job title (See Instructions)		Employer (See Instructions	S)		
Retired				<u> </u>		
Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
08/09/2024	Warach, Khurram					\$50.00
	Contributor address; City; Sta	te; Zip Code]		
	Frisco, TX 75033	1				
	pation / Job title (See Instructions)		Employer (See Instructions	S)		
Civil Enginee	<u>بر المحمد ا</u>		CDM Smith			_

The Instruction Guide explains how to complete this form.				1	Total pages Schedule A1: Sch: 33/35 Rpt: 36/54		
2 FILER NAME				3	3 Filer ID (Ethics Commission Filers)		
Johnston, Chavva A. (Mrs.)					00088050		
4 Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)			
09/10/2024	Ward, Alisa					\$75.00	
	6 Contributor address; City; State; Zip Code			"			
	Erisco, TX 75034						
Frisco, TX 75034 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)				<u> </u>			
Physician		<i>›)</i>	Centennial OB/GYN	5)			
Date	Full name of contributor			Т	Amount of Contribution (\$)		
09/10/2024	Ward, Alisa	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$45.00	
0311012024				-		Ψ+0.00	
	Contributor address; City; State; Zip Code						
	Frisco, TX 75034						
Principal occu	pation / Job title (See Instructions	3)	Employer (See Instructions	5)			
Physician			Centennial OB/GYN				
Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)		
09/10/2024	Ward, Leeanne					\$35.00	
	Contributor address; City; St	tate; Zip Code		1			
Frisco, TX 75034 Principal occupation / Job title (See Instructions) Employer (See Instructions)				<u> </u>			
Programmer			Employer (See Instructions Ushv	5)			
Date	Full name of contributor			Τ	Amount of Contribution (\$)		
07/25/2024	Full name of contributor out-of-state PAC (ID#:) Watkins, Katherine				Amount of Contribution (\$)	\$50.00	
UTILOILOL	Contributor address; City; State; Zip Code			ł		Ψυυ.υυ	
	Contributor address, City, State, Zip Code						
	Frisco, TX 75036						
Principal occupation / Job title (See Instructions)			Employer (See Instructions	5)			
Not Employed			Not Employed				
Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)		
07/25/2024	Watkins, Katherine					\$25.00	
	Contributor address; City; State; Zip Code			1			
	Erisco TV 75026						
Drincinal occu	Frisco, TX 75036		Employer (See Instructions	<u> </u>			
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions Not Employed	5)				

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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	The Instru	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 34/35 Rpt: 37/54		
2	FILER NAME		3	Filer ID (Ethics Commission	n Filers)	
		havva A. (Mrs.)			00088050	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	09/09/2024	West, Lisa				\$25.00
		6 Contributor address; City; State; Zip Code				
		McKinney, TX 75072				
8		ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Stay at home	e parent	Self			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/14/2024	Wood, Sherri				\$30.00
		Contributor address; City; State; Zip Code				
		Sanger, TX 76266				
	Drincinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Not Employe		Not Employed	9		
_			·	<u> </u>	Array of Cantribution (f)	
	Date 08/10/2024	Full name of contributor out-of-state PAC (ID#: Yeoman-Lomangino, Sarah)		Amount of Contribution (\$)	\$20.00
	0011012024	Contributor address; City; State; Zip Code				Φ20.00
		Continution address, City, State, Zip Code				
		SANGER, TX 76266				
	Principal occupation / Job title (See Instructions) Employer (See Instruction					
	Clinic manaç	jer	Denton county mhmr			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/14/2024	binnion, dana				\$100.00
		Contributor address; City; State; Zip Code				
	Deinsinglasse	Denton, TX 76208				
	Not Employe	ipation / Job title (See Instructions)	Employer (See Instructions Not Employed	5)		
				-		
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	ቀንፍ ሰብ
	07/04/2024 charley, jacqueline					\$35.00
		Contributor address; City; State; Zip Code				
		Allen, TX 75002				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Not Employe		Not Employed	,		
⊢						

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction G	uide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 35/35 Rpt: 38/54	
2 FILER NAME	3	Filer ID (Ethics Commission	n Filers)			
Johnston, Chavva A.	(Mrs.)		00088050	,		
	ame of contributor	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
09/26/2024 hawk	kins, sally					\$125.00
6 Contr	ributor address; City; Sta	ate; Zip Code		1		
Frisc	o, TX 75034					
8 Principal occupation / Jo	ob title (See Instructions))	9 Employer (See Instructions	5)		
Not Employed			Not Employed			
Date Full n	ame of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
07/25/2024 lench	nner, paul	—				\$25.00
Contr	ributor address; City; St			1		
	co, TX 75036					
Principal occupation / Jo	ob title (See Instructions)	Employer (See Instructions	5)			
Not employed			Not employed			
	name of contributor	out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
08/21/2024 rudki	08/21/2024 rudkin, lynn					\$10.00
Contributor address; City; State; Zip Code						
Lowi						
	sville, TX 75077	Employer (Soo Instructions	<u> </u>			
Principal occupation / Jo Not Employed)	Employer (See Instructions Not Employed	5)		
				1	t	
	ame of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$50.00
	s, alicia					ΦQ0.00
Contr	ributor address; City; Sta	ate; Zip Code				
Aubr	ey, TX 76227					
Principal occupation / Jo)	Employer (See Instructions	<u>ا</u> چ)		
Not Employed						
Date Full n	ame of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
09/21/2024 wiest						\$100.00
Contr	Contributor address; City; State; Zip Code					
		-				
frisco	o, TX 75035					
Principal occupation / Jo	ob title (See Instructions))	Employer (See Instructions	5)		
flight attendant			american airlines			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

The Instru	iction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 1/2 Rpt: 39/54						
	: havva A. (Mrs.)	3 Filer ID (Ethics Commission Filers) 00088050						
⁴ TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$						
5 Date 07/29/2024	 Full name of contributor out-of-state PAC (ID#: Alliance Catering 7 Contributor address; City; State; Zip Code)	8 Amount of 9 In-kind contribution contribution (\$) description \$367.00 I catering for fundraiser					
10 Dringing age	frisco, TX 75035	11 Employer (EOD NON	Check if travel outside of Texas. Complete Schedule T.					
10 Principal occi	upation / 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 contributc	r'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 out-of-state PAC (ID#: Blue Horizon Texas PAC Contributor address; City; State; Zip Code)	Amount of In-kind contribution contribution (\$) description \$100.00 Strategy session, endorsement, social media, email promotion					
	San Antonio , TX 78278		Check if travel outside of Texas. Complete Schedule T.					
Principal occu	upation / 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 contributo	or'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 out-of-state PAC (ID#: Hayden, Marilee Contributor address; City; State; Zip Code)	Amount of In-kind contribution contribution (\$) description \$2,300.00 I Catering for fundraiser.					
	frisco, TX 75035	E 1 (505 NON	Check if travel outside of Texas. Complete Schedule T.					
retired	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON 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

The Instru	iction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 2/2 Rpt: 40/54					
2 FILER NAME		3 Filer ID (Ethics Commission Filers)					
	chavva A. (Mrs.)	00088050					
	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$					
5 Date 09/06/2024	 6 Full name of contributor out-of-state PAC (ID#: Texas Winter Consulting 7 Contributor address; City; State; Zip Code)	8 Amount of 9 In-kind contribution contribution (\$) description \$1,500.00 I campaign Video				
	Allen , TX 75002		I Check if travel outside of Texas. Complete Schedule T.				
10 Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-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 contributo	or'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 out-of-state PAC (ID#: Thompson, Ramona Contributor address; City; State; Zip Code)	Amount of contribution (\$) \$95.00 I Cupcake boxes and supplies for bake sale fundraiser				
	Frisco, TX 75036		Check if travel outside of Texas. Complete Schedule T.				
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON					
Retired							
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)						

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)				
	Sch: 1/13 Rpt: 41/54		Johnston, Chavva A. (Mrs.)	00088050							
4	Date	5	Payee name								
	07/09/2024		5th street patio cafe								
6	6 Amount (\$) 7 Payee address; City; State; Zip Code \$7.43 \$621 5th street \$621 5th street										
			Frisco, TX 75035								
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the Food/Beverage Expense				top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense FDC breakfast							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		candidate/Officeholder name C	Office sou	Jht		Office held				
	Date		Payee name								
	08/13/2024		5th street patio cafe								
Amount (\$)			Payee address; City; State; Zip Code								
	\$21.12 8621 5th street Frisco, TX 75035										
PURPOSE OF EXPENDITURE			 (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Scheder Check if Austin, TX, officeholder living expense FDC breakfast meeting 								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held					Office held				
	Date		Payee name								
	08/09/2024		EXECUTIVE PRESS								
	Amount (\$) \$303.00		Payee address; City; State; Zip Code 1400 Presidential Dr #110								
			Richardson, TX 75080								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Printing Expense	edule)			de of Texas. Complete Schedule T. officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	yht		Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political C Credit Card Payment			Fees Office Overhead/Rental Expense T Food/Beverage Expense Polling Expense T - Gift/Awards/Memorials Expense Printing Expense T					Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 2/13 Rpt: 42/54	Johnston, Chavva A. (Mrs.) 00088050								
4	Date 08/12/2024	5	Payee name EXECUTIVE PRES	20						
6	Amount (\$)	7	-		ate; Zip Co	ode				
	\$160.20		1400 Presidential I	Dr #110						
			Richardson, TX 75	080						
8	PURPOSE	(a)	Category (See Categor	ies listed at the top of this	schedule)	(b)	Description			
	OF		Printing Expense		····,		Check if travel	outsid	de of Texas. Com	plete Schedule T.
	EXPENDITURE		5 .				Check if Austin	, TX,	officeholder living	g expense
							flyers			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholde	r name	Office sou	ught			Office he	eld
	Date		Payee name							
	08/12/2024		EXECUTIVE PRES	SS						
Amount (\$) Payee address; City; State; Zip Code										
	\$182.81 1400 Presidential Dr #110									
			Richardson, TX 75	080						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categor Printing Expense	ies listed at the top of this	schedule)	(b)				plete Schedule T.
							Yard signs	, IX,	officeholder living	j expense
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholde	r name	Office sou	ught			Office he	eld
	Date		Payee name							
	09/09/2024		EXECUTIVE PRES	SS						
					ate; Zip Co	ada				
	Amount (\$)		-		ale, Zip Ci	Jue				
	\$1,288.93		1400 Presidential I	Jr #110						
			Richardson, TX 75	080						
	PURPOSE	(a)	Category (See Categor	ies listed at the top of this	schedule)	(b)	Description			
	OF EXPENDITURE		Printing Expense				Check if travel	outsio	de of Texas. Com	plete Schedule T.
	EXPENDITORE								officeholder living	j expense
							door hangers	5		
						1				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholde	r name	Office sou	ught			Office he	eld

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political C Credit Card Payment			Fees Office Overhead/Rental Expense T Food/Beverage Expense Polling Expense T - Gift/Awards/Memorials Expense Printing Expense T					Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics	s Commission Filers)
	Sch: 3/13 Rpt: 43/54		Johnston, Chavva A. (Mrs.) 00088050									
4	Date 09/09/2024		5 Payee name EXECUTIVE PRESS									
6	Amount (\$)	7	Payee addres	s; City;	State	; Zip Co	le					
	\$339.91											
8	PURPOSE	(a)	Category (so	Catagorias listed a	t the ten of this cab	odulo)	(b) Desc	rintion				
8 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Yard signs												
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Offic	eholder name	C	Office sou	Jht			Office he	eld	
	Date		Payee name									
	08/28/2024 Hilton garden inn											
Amount (\$) Payee address; City; State; Zip Code												
	\$14.56	56 500 N Interstate 35, Austin, TX 78701										
						side of Texas. Complete Schedule T. K, officeholder living expense anidate Training in Austin						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	eholder name	(Office sou	Iht			Office he	eld	
-	Date		Payee name									
	07/03/2024		Intuit Quick I	Books								
-	Amount (\$)		Payee addres		State	; Zip Co	le					
	\$9.59	1	2750 Coast	-		,						
			Mountain Vie	ew , CA 94043	3							
	PURPOSE OF EXPENDITURE		Category _{(Se} Accounting/I	e Categories listed a 3anking	t the top of this sch	nedule)	Cr	neck if travel		de of Texas. Com officeholder living		
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offic	eholder name	(Dffice sou	Iht			Office he	eld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)							
-	Sch: 4/13 Rpt: 44/54	Johnston, Chavva A. (Mrs.)	00088050							
4	Date 08/07/2024	5 Payee name Intuit Quick Books								
6 Amount (\$) 7 Payee address; City; State; Zip Code \$9.59 2750 Coast Ave Mountain View , CA 94043										
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense quick books 								
9	9 Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH									
	Date	Payee name								
	09/09/2024	Intuit Quick Books								
	Amount (\$)Payee address;City;State; Zip Code\$9.592750 Coast Ave									
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held H								
	Date	Payee name								
	07/29/2024	Jakes Burgers								
	Amount (\$) \$70.78	Payee address; City; State; Zip Code 6195 main st								
		Frisco, TX 75035								
	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense FDC happy hour									
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services 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)						
1	Total pages Schedule F1:	FILER NAME	B Filer ID (Ethics Commission Filers)						
	Sch: 5/13 Rpt: 45/54	Johnston, Chavva A. (Mrs.)	00088050						
4	Date	Payee name							
	07/23/2024	Mailchimp							
6	Amount (\$)	Payee address; City; State; Zip Code							
	\$1.99	405 N Angier Ave							
		otlanta CA 20200							
		atlanta, GA 30308							
8	PURPOSE OF	a) Category (See Categories listed at the top of this schedule) (b) Description							
	EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense						
		email program	- ·						
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held									
	Date	Payee name							
	08/01/2024								
	Amount (\$)								
	\$21.32	405 N Angier Ave							
		atlanta, GA 30308							
	PURPOSE OF	(b) Description (b) Description							
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
		Email program							
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held						
	expenditure to benefit C/OI								
	Date	Payee name							
	08/14/2024	Mailchimp							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$12.79	405 N Angier Ave							
	φ12.15								
		atlanta, GA 30308							
	PURPOSE	a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE		tside of Texas. Complete Schedule T.						
		Virtual mailbox	X, officeholder living expense						
			renta						
	Complete ONL V if direct	Candidate/Officeholder name Office sought	Office held						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF								

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expen nittee Legal Services The Instruction Guide	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2 F	ILER NAME				3	Filer ID (Ethics Commission Filers)	
	Sch: 6/13 Rpt: 46/54		lohnston, Chavva A. (Mrs.)					00088050	
4	Date 09/03/2024	5 Payee name Mailchimp							
6	Amount (\$)		Payee address; City;	State	Zip Co	le			
Ū	\$42.64								
8	PURPOSE	(a) (Category (See Categories listed at the to	n of this sch	edule)	(b) Description			
OF EXPENDITURE Advertising Expense					ide of Texas. Complete Schedule T. , officeholder living expense				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ht		Office held	
	Date	F	Payee name						
	07/22/2024 Marios Mexican								
Amount (\$) Payee address; City; State; Zip Code									
	\$95.80		2831 Eldorado Pkwy #112 .ittle Elm, TX 75068						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the to Food/Beverage Expense	p of this sch	edule)		n, TX	ide of Texas. Complete Schedule T. K, officeholder living expense Iy meeting	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Office sought					Office held	
	Date	F	Payee name						
	07/02/2024		NPG Van						
	Amount (\$) \$106.00		Payee address; City; 355 15th St NW, Suite 650	State;	; Zip Co	le			
		\ \	vashington D.C, DC 20052						
	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Voter database access							, officeholder living expense	
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Dffice sou	ht		Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		-	als Expense	Office Ove Polling Exp Printing Exp Salaries/W			Travel in District Travel Out of Dis	quipment & Related Expense	
1	Total pages Schedule F1:	2 F	ILER NAME				3	Filer ID	(Ethics Commission Filers)	
	Sch: 7/13 Rpt: 47/54		ohnston, Chavva A. (Mrs	5.)				00088050		
4	Date 09/05/2024		Payee name NPG Van							
6	Amount (\$) \$106.60	6	Payee address; City; 555 15th St NW, Suite 65 vashington D.C, DC 2005	0	; Zip Co	de				
8	PURPOSE OF EXPENDITURE		Category (See Categories listed a Advertising Expense	at the top of this sch	edule)		n, TX,	ide of Texas. Comp , officeholder living SOftware		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	C	Office sou	ght		Office he	ld	
	Date	F	ayee name							
	09/06/2024	۱	IPG Van							
	Amount (\$) \$106.60	6	vayee address; City; 55 15th St NW, Suite 65 vashington D.C, DC 2005	0	Zip Co	de				
	PURPOSE OF EXPENDITURE	(a) (Category (See Categories listed a Advertising Expense		edule)		n, TX,	ide of Texas. Comp , officeholder living SOftware		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght		Office he	ld	
	Date	F	ayee name							
	07/02/2024		Dne Notary							
	Amount (\$) \$25.00		Payee address; City; 15 Mission Street FL 37	State;	; Zip Co	de				
		5	San Francisco, CA 94105	5						
	PURPOSE OF EXPENDITURE		Category (See Categories listed a lotary services	at the top of this sch	edule)			ide of Texas. Comp , officeholder living		
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght		Office he	ld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp mittee Legal Services The Instruction Guide		Office Over Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)	
	Sch: 8/13 Rpt: 48/54		Johnston, Chavva A. (Mrs.)					00088050		
4	Date 09/03/2024		Payee name Petroff, Suzi							
6	Amount (\$) \$400.00		Payee address; City; 10802 Dove Brook Cir Dallas, TX 75230	State;	Zip Coo	le				
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the t Office Overhead/Rental Expe		edule)			de of Texas. Comp , officeholder living		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ht		Office he	ld	
	Date		Payee name							
	08/01/2024		Rotate bar and grill							
	Amount (\$) \$80.78	!	Payee address; City; 5454 Main St #123 irisco, TX 75033	State;	Zip Coo	le				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the t Food/Beverage Expense	op of this sch	edule)		n, TX,	de of Texas. Com , officeholder living Council netv	expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ht		Office he	ld	
	Date		Payee name							
	07/22/2024	:	Sunny Street Cafe							
	Amount (\$) \$28.78		Payee address; City; 2705 Little Elm Pkwy,	State;	Zip Coo	le				
			Little Elm, TX 75068							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the t Food/Beverage Expense	op of this sch	edule)		n, TX,	de of Texas. Comp , officeholder living letwork mee	expense	
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Dffice sou	ht		Office he	ld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)							
	Sch: 9/13 Rpt: 49/54	Johnston, Chavva A. (Mrs.)	00088050							
4	Date 09/16/2024	Payee name The brass Tap								
6	Amount (\$)	Payee address; City; State; Zip Code								
	\$43.30	1951 FM 423 ste 900 Frisco, TX 75033								
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense :kwalk event							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	07/02/2024	The colony print and ship								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$29.97	6805 Main St #430 the colony, TX 75056								
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense IOX							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
F	Date	Payee name								
	08/05/2024	The colony print and ship								
	Amount (\$) \$9.99	Payee address; City; State; Zip Code 6805 Main St #430								
		the colony, TX 75056								
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense DX rental							
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Office Averhaed/Rental Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)							
	Sch: 10/13 Rpt: 50/54	Johnston, Chavva A. (Mrs.)	00088050							
4	Date 09/06/2024	Payee name The colony print and ship								
6	Amount (\$) \$9.99	Payee address; City; State; Zip Code 6805 Main St #430 the colony, TX 75056								
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense OX							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	08/01/2024	Tollerson, Yvette								
	Amount (\$) \$385.00	Payee address; City; State; Zip Code 3111 Creekridge sachse, TX 75078								
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense OCKWAlking							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	07/22/2024	Truist								
	Amount (\$) \$0.80	Payee address;City;State; Zip Code12292 FM 423								
		FRisco, TX 75033								
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense							
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)							
	Sch: 11/13 Rpt: 51/54	Johnston, Chavva A. (Mrs.)	00088050							
4	Date	5 Payee name								
	09/09/2024	Truist								
6	Amount (\$)	7 Payee address; City; State; Zip Code								
	\$72.00	12292 FM 423								
		FRisco, TX 75033								
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF EXPENDITURE	Fees Check if travel o	outside of Texas. Complete Schedule T.							
			TX, officeholder living expense							
		bank fees								
Ļ										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
-	Date	Payee name								
	08/08/2024	Walmart								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$79.49	12220 Fm 423								
	ቅ /	12220 FIII 423								
		FRisco, TX 75033								
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF EXPENDITURE	Event Expense	outside of Texas. Complete Schedule T.							
			TX, officeholder living expense							
			rerages for campaign event							
	Complete ONIL V if direct	Or distant Office helder some								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	09/16/2024	Walmart								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$22.67	12220 Fm 423								
		FRisco, TX 75033								
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF EXPENDITURE		outside of Texas. Complete Schedule T.							
			TX, officeholder living expense							
		duct tape and	sign supplies							
	Complete ONIL V if direct	Candidata/Office halder name	Office hold							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Cor Credit Card Payment			Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense - Gift/Awards/Memorials Expense Printing Expense				Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2	FILER NAM	E					3	Filer ID	(Ethics Commission Filers)	
	Sch: 12/13 Rpt: 52/54			Chavva A. (Mrs.)					00088050		
4	Date	5	Payee name	•								
	07/02/2024		polaris grou	qr								
6	Amount (\$)	7	Payee addre	ess; City;	State;	; Zip Co	de					
	\$1,000.00		7210 Virgir	nia Pkwy								
			ste 100 box	x 6385,								
			mckinney,	TX 75071								
8	PURPOSE		-		··		(b) Description	on				
	OF	(,	Consulting	See Categories listed at Expense	the top of this some	nedule)			outsic	de of Texas. Com	plete Schedule T.	
	EXPENDITURE		Consulting	Expense			Check if	if Austin,	TX,	, officeholder living expense		
	campaign co							gn con	isulting			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	ïceholder name	C	Office sou	jht			Office he	ld	
	Date		Payee name	•								
	08/05/2024		polaris grou	qu								
	Amount (\$)		Payee addre	ess; City;	State;	; Zip Co	de					
	\$2,531.00		7210 Virgir			· •						
	· ·		ste 100 box	-								
			mckinney,									
	BUBBBBB						<u> </u>					
	PURPOSE OF EXPENDITURE	(a)	Category (s Consulting	iee Categories listed at Expense	the top of this sch	nedule)		if travel o if Austin,	тx,	de of Texas. Comp officeholder living		
Complete <u>ONLY</u> if direct expenditure to benefit C/C			Candidate/Officeholder name Office sought					Office held				
	Date		Payee name									
	08/21/2024		polaris grou									
	Amount (\$)		Payee addre	ess; City;	State:	; Zip Co	de					
	\$1,531.00		7210 Virgir	-	,	,						
			ste 100 box	-								
			mckinney,				a >					
	PURPOSE OF			See Categories listed at	the top of this sch	nedule)	(b) Descriptio		uteir	de of Texas. Com	alata Schadula T	
	EXPENDITURE		Consulting	Expense				if Austin,	тX,	officeholder living		
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Off	iceholder name	C	Office sou	jht			Office he	ld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exper mittee Legal Services	Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense				Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)				
	Sch: 13/13 Rpt: 53/54		Johnston, Chavva A. (Mrs.)					00088050				
4	Date 09/03/2024	5	Payee name polaris group									
6	Amount (\$)	7	Payee address; City;	State	; Zip Co	le						
	\$1,531.00		7210 Virginia Pkwy		•							
	. ,		ste 100 box 6385,									
			mckinney, TX 75071									
8	PURPOSE OF	(a)	Category (See Categories listed at the top	of this sch	nedule)	(b) Description						
	EXPENDITURE		Consulting Expense					ide of Texas. Complete Schedule T.				
							Check if Austin, TX, officeholder living expense					
						Consulting fe	es					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	Jht		Office held				
	Date		Payee name									
	09/05/2024		polaris group									
	Amount (\$)		Payee address; City;	State	; Zip Co	le						
	\$1,000.00		7210 Virginia Pkwy	Claro	, <u></u> p 00.							
	φ1,000.00		• •									
			ste 100 box 6385,									
			mckinney, TX 75071									
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top Consulting Expense	of this sch	iedule)		, TX,	ide of Texas. Complete Schedule T. , officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	(Dffice sou	Iht		Office held				
_	Data	-										
	Date		Payee name									
	08/02/2024		smith, David									
	Amount (\$)		Payee address; City;	State;	; Zip Co	le						
	\$1,000.00		1600 Amelia Court,									
			Apt. 1023									
			Plano, TX 75075									
	PURPOSE	(a)	Category (See Categories listed at the top	of this sch	odulo)	(b) Description						
	OF	Ľ	Consulting Expense	01 (113 301)	iculic)		outsi	ide of Texas. Complete Schedule T.				
	EXPENDITURE					Check if Austin Field work co		, officeholder living expense ulting				
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	(Dffice sou	Jht		Office held				

	RRED OBLIGATIONS				
				SCHEDULE	F2
	EXPENDITURE CA				
Advertising Expense Accounting/Banking Consulting Expense	Event Expense Fees Food/Beverage Expense		payment/Reimbursement /erhead/Rental Expense xpense	Solicitation/Fundraising Expense Transportation Equipment & Related Expen Travel in District	nse
Contributions/ Donations Made By Candidate/Officeholder/Politica	y - Gift/Awards/Memorials Exper	nse Printing E		Travel Out of District OTHER (enter a category not listed above))
	The Instruction Guide e	explains how to co	omplete this form.		
1 Total pages Schedule F2: Sch: 1/1 Rpt: 54/54	2 FILER NAME Johnston, Chavva A. (Mrs.)			3 Filer ID (Ethics Commission 00088050	Filers)
4		GATIONS		\$	
5 Date	6 Payee name				
09/06/2024	EXECUTIVE PRESS				
7 Amount (\$)	8 Payee address; City;	State; Zip C	ode		
\$3,101.36	1400 Presidential Dr #110				
	Richardson, TX 75080				
9 TYPE OF EXPENDITURE	X Political	Non-Po	litical		
10 PURPOSE OF	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	antida of Taura Complete Calendula T	
EXPENDITURE	Printing Expense			outside of Texas. Complete Schedule T. , TX, officeholder living expense	
			Road signs a	nd yard signs	
	O se slidete (Office she slater records	0"			
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office so	ugni	Office held	