CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to complete this	form. 1 Filer ID (Ethics Commiss 00083642	ion Filers)	2 Total pages filed: 50
3 CANDIDATE /	MS / MRS / MR FIRST		MI	OFFICE USE ONLY
OFFICEHOLDER	The Honorable Carrie			
NAME				Date Received
				ELECTRONICALLY FILED
	NICKNAME LAST		SUFFIX	10/07/2024
	Isaac			
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT / SUITE	#; CITY;	ZIP CODE	Date Hand-delivered or Date Postmarked
MAILING	100 Commons Rd. #7-125			
ADDRESS				Receipt # Amount
Change of Address	Dripping Springs , TX 78620			
				Date Processed
				Date Imaged
E CAMDAICN			N41	
5 CAMPAIGN TREASURER	MS / MRS / MR FIRST		MI	
NAME	Mr. Jason			
	NICKNAME LAST		SUFFIX	
	Isaac			
6 CAMPAIGN	STREET ADDRESS (NO PO BOX PL	EASE); APT	/ SUITE #; CITY;	STATE; ZIP CODE
TREASURER	100 Commons Rd #7-125	<i>,</i> .		
ADDRESS				
(Residence or Business)				
	Dripping Springs , TX 78620			
7 CAMPAIGN	AREA CODE PHONE NUME	BER EXTENSION		
TREASURER				
PHONE	(512) 850-5524			
8 REPORT				
8 REPORT TYPE	January 15 X 30th	day before election	Runoff	15th day after campaign treasurer
	January 15 X 30th			appointment (officeholder only)
	July 15 8th d		Exceeded modified	Final Report (Attach C/OH-FR)
		r r	eporting limit	-
9 PERIOD	Month Day Year		Month Day	Year
COVERED	07/01/2024	THROUGH	09/26/2024	
				-
10 ELECTION	ELECTION DATE		ELECTION TYPE	
	Month Day Year	Primary	Runoff	Other
	11/05/2024			
		χ General	Special	
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT	(if known)
	State Representative District 73		State Representa	ative District 73
	1			
		GO TO PAGE 2		
Forms provided by Te	exas Ethics Commission	www.ethics.state.tx.us		Version V4.1.0.48da51

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2 2 of 50

13 C / OH NAME	Isaac, Carrie (The Ho	onorable)	14 Filer ID (00083642	Ethics Commis	ssion Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditur These expenditures may have been made without th d officeholders are required to report this information	ne candidate's or office	holder's know	ledge or
X Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	X GENERAL	Hays County Republican Party			
		COMMITTEE ADDRESS			
	SPECIFIC	6000 FM 150			
		Kyle, TX 78640			
		COMMITTEE CAMPAIGN TREASURER NAME			
		Hennager, Guy			
		COMMITTEE CAMPAIGN TREASURER ADDRES	S		
	916 Mustang Lane				
		San Marcos, TX 78666			
16 CONTRIBUTION TOTALS	\$	0.00			
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS))	\$	37,995.66
EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES TOTALS					0.00
	4. TOTAL POLITICAL EXPENDITURES				
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LA	AST DAY OF THE	\$	80,762.76
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS (RTING PERIOD	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT					
		I swear, or affirm, under penalty true and correct and includes all under Title 15, Election Code.			
		The Hon	orable Carrie Isaac		
		Signature of 0	Candidate or Officehol	der	
AFFIX NO	TARY STAMP / SEAL AB	OVE			
Sworn to and subs	cribed before me. bv the s	aid	. this the		day
		ertify which, witness my hand and seal of office.			,
Signature of offi	cer administering	Printed name of officer administering	Title of officer	administering	oath
Forms provided by Te	xas Ethics Commissior	www.ethics.state.tx.us		Version V4.1	0.48da51f7

CANDIDATE / OFFICEHOLDER REPORT SUPPORT & TOTALS

FORM C/OH

Page 3 of 50

C / OH NAME	Isaac, Carrie (The Ho	norable)	Filer ID 00083642	(Ethics Commission Filers)			
17 NOTICE FROM POLITICAL COMMITTEE(S)	This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures						
	COMMITTEE TYPE	COMMITTEE NAME					
	X GENERAL	Texas REALTORS Political Action Committe	е				
		COMMITTEE ADDRESS					
	SPECIFIC	1115 San Jacinto Blvd					
		Suite 200					
		Austin, TX					
		COMMITTEE CAMPAIGN TREASURER NAME					
		Cantu, Leslie					
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS				
		P.O. Box 2246					
		Austin, TX 78768					
NOTIOE	This have is for water a						
NOTICE FROM POLITICAL COMMITTEE(S)	expenditures may have b	of political expenditures by political committees to sub even made without the candidate's or officeholder's d to report this information only if they receive notice	knowledge or co	onsent. Candidates and			
	COMMITTEE TYPE	COMMITTEE NAME					
	X GENERAL	Texas Alliance For Life PAC					
		COMMITTEE ADDRESS					
	SPECIFIC	8000 Centre Park Drive Suite 380					
		Austin, TX 78754					
		COMMITTEE CAMPAIGN TREASURER NAME					
		Shaw, James					
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS				
		4505 Corazon Cv					
		Round Rock, TX 78681					

SUBTOTALS - C/OH	С	FORM C/OH COVER SHEET PG 3 4 of 50
18 FILER NAME Isaac, Carrie (The Honorable)	19 Filer ID 00083642	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 37,995.66
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE E: LOANS		\$
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$ 23,284.59
6. X SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 1,185.43
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIO	DNS	\$
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 CONTRIBUTIO	DNS	\$
12. X SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$ 83.00

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The Instru	iction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 1/20 Rpt: 5/50	
2 FILER NAME			3 Filer ID (Ethics Commission	on Filers)
	- e (The Honorable)		00083642	J,
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
07/18/2024				\$50.00
	6 Contributor address; City; State; Zip Code			
	Wimberley, TX 78676			
	upation / Job title (See Instructions)	9 Employer (See Instructions	s)	
Preacher		Cowboys for Jesus		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/04/2024				\$500.00
	Contributor address; City; State; Zip Code			
	Austin, TX 78701			
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions	3)	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
07/04/2024				\$2,500.00
	Contributor address; City; State; Zip Code			
Di Jackara	Houston, TX 77027		、	
Principal occi	upation / Job title (See Instructions)	Employer (See Instructions	5)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	*****
07/18/2024	·			\$250.00
	Contributor address; City; State; Zip Code			
	Canyon Lake, TX 78133			
Princinal occ	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
Retired		Retired)	
	Full name of contributor Out-of-state PAC (ID#:		Amount of Contribution (\$)	
Date 07/18/2024)		\$15.00
0111012027				Φ10.00
	Contributor address; City; State; Zip Code			
	Canyon Lake, TX 78133			
Principal occi	upation / Job title (See Instructions)	Employer (See Instructions	 ;)	
retired		retired	,	

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	The Instru	ction Guide explains how to complete t	this for	rm.	1	Total pages Schedule A1: Sch: 2/20 Rpt: 6/50	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
		e (The Honorable)			-	00083642	
4	Date	5 Full name of contributor out-of-state PAC	C (ID#:)	7	Amount of Contribution (\$)	
	08/13/2024	Ansley, Jim					\$20.00
		6 Contributor address; City; State; Zip Code					
		Wimberley, TX 78676	<u> </u>				
8		pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Retired			Retired			
	Date	Full name of contributor out-of-state PAC	C (ID#:)		Amount of Contribution (\$)	
	09/17/2024	Armke, James					\$500.00
		Contributor address; City; State; Zip Code					
	<u></u>	Dripping Springs, TX 78620		(2			
		ipation / Job title (See Instructions)		Employer (See Instructions)		
	retired			retired			
	Date	Full name of contributor out-of-state PAC	C (ID#:)		Amount of Contribution (\$)	
	07/01/2024	Asbury, Debbie					\$1,000.00
	Contributor address; City; State; Zip Code						
		Canyon Lake, TX 78133					
┝	Principal occu	ipation / Job title (See Instructions)	—	Employer (Soo Instructions	<u> </u>		
	Retired			Employer (See Instructions Retired)		
╞				Retired			
	Date	Full name of contributor out-of-state PAC	C (ID#:)		Amount of Contribution (\$)	¢1 000 00
	08/01/2024	Asbury, Debbie					\$1,000.00
		Contributor address; City; State; Zip Code					
		Canyon Lake, TX 78133					
┝	Principal occu	upation / Job title (See Instructions)	<u> </u>	Employer (See Instructions)		
	Retired			Retired	,		
⊨		Full name of contributor Out-of-state PAC	2 (15#)	· · · · · · · · · · · · · · · · · · ·		Amount of Contribution (\$)	
	Date 09/01/2024	Full name of contributor out-of-state PAC Asbury, Debbie	C (ID#)			\$1,000.00
	03/01/202-	Contributor address; City; State; Zip Code					Ψ1,000.00
		Contributor address, City, State, Zip Code					
		Canyon Lake, TX 78133					
⊢	Principal occu	I pation / Job title (See Instructions)		Employer (See Instructions)		
	Retired			Retired	,		
⊢							

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 3/20 Rpt: 7/50 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Isaac, Carrie (The Honorable) 00083642 Date 4 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 07/04/2024 Associated Builders & Contractors of TX PAC \$1,000.00 6 Contributor address; City; State; Zip Code Austin, TX 78767 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 \$500.00 Austin Republican Women PAC Fund Contributor address; City; State; Zip Code Austin, TX 78738 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 09/17/2024 Barnard, Olivia \$250.00 Contributor address; City; State; Zip Code Austin, TX 78737 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Real Estate** Self Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 07/28/2024 \$50.00 Baugh, Joseph Contributor address; City; State; Zip Code Wimberley, TX 78676 Principal occupation / Job title (See Instructions) Employer (See Instructions) retired retired Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 07/04/2024 \$20.00 Benner, Gail Contributor address; City; State; Zip Code Wimberley, TX 78676 Principal occupation / Job title (See Instructions) Employer (See Instructions) owner Rough Creek Lavender

	The Instru	ction Guide explains how to complete th	is fo	rm.	1	Total pages Schedule A1: Sch: 4/20 Rpt: 8/50	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
-		e (The Honorable)			ľ	00083642	11 11010)
4	Date	5 Full name of contributor out-of-state PAC (I	D#:)	7	Amount of Contribution (\$)	
	07/04/2024	Blanford, Sondra					\$30.00
		6 Contributor address; City; State; Zip Code					
		Driftwood, TX 78619					
8		upation / Job title (See Instructions)	9	B Employer (See Instructions	;)		
	Artist			Retired			
	Date	Full name of contributor out-of-state PAC (I	D#:)	\square	Amount of Contribution (\$)	
	09/23/2024	Boyd, Geneva					\$100.00
		Contributor address; City; State; Zip Code					
		New Braunfels, TX 78132					
	Principal occu	ipation / Job title (See Instructions)		Employer (See Instructions	;)		
	retired			retired			
	Date	Full name of contributor out-of-state PAC (I	D#:)	Γ	Amount of Contribution (\$)	
	07/09/2024	Brewer, John					\$100.00
		Contributor address; City; State; Zip Code					
		New Braunfels, TX 78132					
	Principal occu	ipation / Job title (See Instructions)		Employer (See Instructions	;)		
	retired			retired			
	Date	Full name of contributor out-of-state PAC (I	D#:)	Γ	Amount of Contribution (\$)	
	08/09/2024	Brewer, John					\$100.00
		Contributor address; City; State; Zip Code					
		NEW BRAUNFELS, TX 78132					
	Principal occu	ipation / Job title (See Instructions)		Employer (See Instructions	;)		
	retired			retired			
	Date	Full name of contributor out-of-state PAC (I	D#:)	Γ	Amount of Contribution (\$)	
	09/09/2024	Brewer, John					\$100.00
		Contributor address; City; State; Zip Code					
		NEW BRAUNFELS, TX 78132					
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
	retired			retired			
1							

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	The Instru	ction Guide explains how to complete this f	iorm.	1	Total pages Schedule A1: Sch: 5/20 Rpt: 9/50	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Isaac, Carrie	e (The Honorable)			00083642	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/13/2024	Brunkenhoefer, Amy				\$20.00
		6 Contributor address; City; State; Zip Code		1		
-		New Braunfels, TX 78132		Ĺ		
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions)	;)		
	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	09/04/2024	Canyon Lake Republic Women				\$500.00
		Contributor address; City; State; Zip Code				
	<u></u>	Canyon Lake, TX 78133		Ĺ		
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)		
L			<u> </u>	—		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	÷100.00
	09/25/2024					\$100.00
		Contributor address; City; State; Zip Code				
		Bulverde, TX 78163				
	Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions	<u>لــــــــــــــــــــــــــــــــــــ</u>		
	Senior Tax F	Professional	The Fox Alliance			
	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	09/05/2024	Chirohealthcare PLLC				\$150.00
		Contributor address; City; State; Zip Code				
		New Braunfels, TX 78130				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)		
				_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/05/2024	Colyandro, John				\$500.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78701				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ل</u> ۱		
		s Consultant	Colyandro Public Affairs			
-						

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 6/20 Rpt: 10/50
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Isaac, Carrie (The Honorable)	00083642
4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Amount of Contribution (\$)
07/04/2024 Conway, Thea Lewis	\$10.00
6 Contributor address; City; State; Zip Code	
Northville, MI 48168	
8 Principal occupation / Job title (See Instructions) 9 Employer (See	Instructions)
Chiropractor Self	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
07/04/2024 Culver, Janet	\$500.00
Contributor address; City; State; Zip Code	
Drinning Caringo TV 70020	
Dripping Springs, TX 78620	
Principal occupation / Job title (See Instructions) Employer (See	Instructions)
retired retired	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
09/05/2024 Curley, Tiffany	\$250.00
Contributor address; City; State; Zip Code	
New Braunfels, TX 78130	
Principal occupation / Job title (See Instructions) Employer (See	Instructions)
owner,DC Curley Chirop	ractic
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
09/05/2024 Czerminski, Drew	\$650.00
Contributor address; City; State; Zip Code	
Contributor address, City, State, Zip Code	
Converse, TX 78109	
Principal occupation / Job title (See Instructions) Employer (See	Instructions)
Chiropractor Back to Healt	
	-
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
07/21/2024 Edmiston, Chris	\$20.00
Contributor address; City; State; Zip Code	
Austin, TX 78737	
Principal occupation / Job title (See Instructions) Employer (See	Instructions)
Engineer Intel	
Engineer	

The Instruction Guide explains how to complete this form. Sch: 7/ Isaac, Carrie (The Honorable) 3 Filer ID 000836 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Amount Edmiston, Chris 08/31/2024 6 Contributor address; City; State; Zip Code 7 Amount Amo	Iges Schedule A1: 20 Rpt: 11/50 (Ethics Commission Filers) 642 of Contribution (\$) \$20.00 \$20.00 of Contribution (\$) \$500.00
Isaac, Carrie (The Honorable) 000836 4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Amount 08/31/2024 Edmiston, Chris 6 Contributor address; City; State; Zip Code 7 Amount 6 Contributor address; City; State; Zip Code 9 Employer (See Instructions) 9 8 Principal occuration / Job title (See Instructions) 9 Employer (See Instructions) NXP Date Full name of contributor out-of-state PAC (ID#:) Amount 07/18/2024 Full name of contributor out-of-state PAC (ID#:) Amount 07/18/2024 Full name of contributor out-of-state PAC (ID#:) Amount 07/18/2024 Contributor address; City; State; Zip Code Full name of contributor out-of-state PAC (ID#:)	642 of Contribution (\$) \$20.00 of Contribution (\$)
Isaac, Carrie (The Honorable) 000836 4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Amount 08/31/2024 5 Contributor address; City; State; Zip Code 7 Amount 6 Contributor address; City; State; Zip Code 9 Employer (See Instructions) 9 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) NXP Date Full name of contributor out-of-state PAC (ID#:) Amount 07/18/2024 Full name of contributor out-of-state PAC (ID#:) Amount 07/18/2024 Full name of contributor out-of-state PAC (ID#:) Amount 07/18/2024 Full name of contributor out-of-state PAC (ID#:) Amount	642 of Contribution (\$) \$20.00 of Contribution (\$)
08/31/2024 Edmiston, Chris 6 Contributor address; City; State; Zip Code Austin, TX 78737 Austin, TX 78737 8 Principal occupation / Job title (See Instructions) Engineer 9 Employer (See Instructions) NXP Date Full name of contributor out-of-state PAC (ID#:) Amount 07/18/2024 Full name of contributor out-of-state; Zip Code Amount	\$20.00 of Contribution (\$)
6 Contributor address; City; State; Zip Code Austin, TX 78737 Austin, TX 78737 8 Principal occupation / Job title (See Instructions) Engineer 9 Employer (See Instructions) NXP Date Full name of contributor out-of-state PAC (ID#:) Amount 07/18/2024 Full name of contributor out-of-state PAC (ID#:) Amount Contributor address; City; State; Zip Code Contributor address; City; State; Zip Code Full name of contributor	of Contribution (\$)
6 Contributor address; City; State; Zip Code Austin, TX 78737 8 Principal occupation / Job title (See Instructions) Engineer Date Full name of contributor out-of-state PAC (ID#:) Amount 07/18/2024 Full name of contributor contributor contributor address; City; State; Zip Code	
Austin, TX 78737 8 Principal occupation / Job title (See Instructions) Engineer 9 Employer (See Instructions) NXP Date Full name of contributor out-of-state PAC (ID#:) O7/18/2024 Full name of contributor contributor contributor contributor ddress; City; State; Zip Code	
8 Principal occupation / Job title (See Instructions) Engineer 9 Employer (See Instructions) NXP Date Full name of contributor out-of-state PAC (ID#:) Amount 07/18/2024 Erben & Yarbrough Contributor address; City; State; Zip Code Image: Contributor address; City; State; Zip Code	
8 Principal occupation / Job title (See Instructions) Engineer 9 Employer (See Instructions) NXP Date Full name of contributor out-of-state PAC (ID#:) Amount 07/18/2024 Erben & Yarbrough Contributor address; City; State; Zip Code Image: Contributor address; City; State; Zip Code	
Engineer NXP Date Full name of contributor out-of-state PAC (ID#:) Amount 07/18/2024 Erben & Yarbrough Contributor address; City; State; Zip Code Amount	
Date Full name of contributor out-of-state PAC (ID#:) Amount 07/18/2024 Erben & Yarbrough Contributor address; City; State; Zip Code Amount	
07/18/2024 Erben & Yarbrough Contributor address; City; State; Zip Code	
Contributor address; City; State; Zip Code	\$500.00
Contributor address; City; State; Zip Code	
Austin, TX 78701	
Austin, TX 78701	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Date Full name of contributor out-of-state PAC (ID#:) Amount	of Contribution (\$)
07/18/2024 Frey, Betty	\$50.00
Contributor address; City; State; Zip Code	+00.00
Continution address, City, State, Zip Code	
New Braunfels, TX 78132	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
retired	
	of Contribution (\$)
	\$20.00
	φ20.00
Contributor address; City; State; Zip Code	
San Marcos, TX 78666	
San Marcos, TX 78666	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Principal occupation / Job title (See Instructions) Employer (See Instructions) Marketing Manager Risk Theory	
Principal occupation / Job title (See Instructions) Employer (See Instructions) Marketing Manager Risk Theory Date Full name of contributor out-of-state PAC (ID#:)	of Contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instructions) Marketing Manager Risk Theory	of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Employer (See Instructions) Marketing Manager Risk Theory Date Full name of contributor out-of-state PAC (ID#:)	
Principal occupation / Job title (See Instructions) Employer (See Instructions) Marketing Manager Risk Theory Date Full name of contributor out-of-state PAC (ID#:) 08/15/2024 Gill, Edward	
Principal occupation / Job title (See Instructions) Employer (See Instructions) Marketing Manager Risk Theory Date Full name of contributor out-of-state PAC (ID#:) 08/15/2024 Gill, Edward Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions) Employer (See Instructions) Marketing Manager Risk Theory Date Full name of contributor out-of-state PAC (ID#:) 08/15/2024 Gill, Edward Contributor address; City; State; Zip Code Bulverde, TX 78163	
Principal occupation / Job title (See Instructions) Employer (See Instructions) Marketing Manager Risk Theory Date Full name of contributor out-of-state PAC (ID#:) 08/15/2024 Gill, Edward Contributor address; City; State; Zip Code Amount	

	The Instru	ction Guide explains how to com	nplete this fo	orm.	1	Total pages Schedule A1: Sch: 8/20 Rpt: 12/50	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
		e (The Honorable)				00083642	
4	Date	5 Full name of contributor 🔲 out-of	f-state PAC (ID#:)	7	Amount of Contribution (\$)	
	08/15/2024	Graham, Terry					\$25.00
	1	6 Contributor address; City; State; Zip C	Code		1		
Ļ	<u></u>	New Braunfels, TX 78132	,		Ļ		
8		ipation / Job title (See Instructions)		9 Employer (See Instructions	5)		
	Retired			Retired			
	Date		f-state PAC (ID#:)		Amount of Contribution (\$)	
	09/04/2024	Grothues, Carol					\$25.00
		Contributor address; City; State; Zip C					
		Dringing Optingo TV 79620					
	Duincipal accu	Dripping Springs, TX 78620			Ĺ		
		<pre>upation / Job title (See Instructions) t</pre>		Employer (See Instructions	5)		
	Psychologist			Self			
	Date		f-state PAC (ID#:)		Amount of Contribution (\$)	
	07/04/2024	Henn, David					\$20.00
	Contributor address; City; State; Zip Code						
		Austin, TX 78737					
\vdash	Principal occu	pation / Job title (See Instructions)	ı	Employer (See Instructions	<u>ا</u>		
	Sales			Oracle	<i>)</i>		
╞					_		
	Date		f-state PAC (ID#:)		Amount of Contribution (\$)	¢100.00
	07/10/2024						\$100.00
		Contributor address; City; State; Zip C	Code				
		Wimberley, TX 78676					
\vdash	Principal occu	pation / Job title (See Instructions)	T	Employer (See Instructions	<u> </u> ו)		
	VP Marketing			Fiberlight	"		
⊨					_	Amount of Constribution (ft)	
	Date 07/04/2024	Herbeck, Thomas	f-state PAC (ID#:)		Amount of Contribution (\$)	\$25.00
	07/04/2024		Code				φ25.00
		Contributor address; City; State; Zip C	Jode				
		Austin, TX 78749					
⊢	Principal occu	pation / Job title (See Instructions)	I	Employer (See Instructions	<u> </u> ເ)		
	Teacher			St Michaels Catholic Pre			
┝			l		~ r-		

	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 9/20 Rpt: 13/50
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
		e (The Honorable)		00083642
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
	07/01/2024	Holland, Bobby		\$50.00
		6 Contributor address; City; State; Zip Code		
		New Braunfels, TX 78132		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)
	Program Ma	nagement	Chenega Applied Soluti	ons LLC
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	07/26/2024	Huth, Tom		\$50.00
		Contributor address; City; State; Zip Code		•
		Wimberley, TX 78676		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)
	retired		retired	
F	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	07/18/2024	Irwin, Michael		\$1,000.00
		Contributor address; City; State; Zip Code		
		San Marcos, TX 78666		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)
	President		SI Mechanical	
	Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	07/04/2024	Jack, Joyce		\$20.00
		Contributor address; City; State; Zip Code		
		Wimberley, TX 78676		
		pation / Job title (See Instructions)	Employer (See Instructions	5)
	Student		Student	
	Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	07/04/2024	Kateff, Janine		\$10.00
		Contributor address; City; State; Zip Code		
L		Austin, TX 78737	i	
		pation / Job title (See Instructions)	Employer (See Instructions	5)
	Retired		Retired	
1				

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 10/20 Rpt: 14/50	
-	FILER NAME			2	-	n Filore)
Ĺ		(The Honorable)		3	Filer ID (Ethics Commission 00083642	on Fliers)
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	07/09/2024	Keffer Konsulting LLC (James L Keffer Sole Mer	mber)			\$1,000.00
		6 Contributor address; City; State; Zip Code				
		Eastland, TX 76448				
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 (\$)	
	08/21/2024	Larson, Marjorie				\$25.00
		Contributor address; City; State; Zip Code				
		Canyon Lake, TX 78133				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	retired		retired			
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	07/03/2024	Lee, Gerald				\$250.00
		Contributor address; City; State; Zip Code				
		San Antonio, TX 78209				
		pation / Job title (See Instructions)	Employer (See Instructions	·		
	Consultant		Andrade - Van de Putte	As	sociates	
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	07/09/2024	Leo, Michael				\$200.00
		Contributor address; City; State; Zip Code				
		Buda, TX 78610				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	retired		retired			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	07/02/2024 Love, Jarod				\$500.00	
	Contributor address; City; State; Zip Code					
1						
\vdash		Austin, TX 78741				
1		pation / Job title (See Instructions)	Employer (See Instructions	5)		
L	Consultant		Delisi Communications			
1						

The Instru	ction Guide explains how to complete	e this form.	1 Total pages Schedule A1:
			Sch: 11/20 Rpt: 15/50
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	e (The Honorable)		00083642
4 Date	5 Full name of contributor Out-of-state P	PAC (ID#:)	7 Amount of Contribution (\$)
07/20/2024	Mahar, Ryan		\$10.00
	6 Contributor address; City; State; Zip Code		
	San Marcos, TX 78666		
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instruction	ls)
Test Engine	ering Manager	Vitesco Technologies L	.LC
Date	Full name of contributor out-of-state P	PAC (ID#:)	Amount of Contribution (\$)
07/04/2024	Marrow, Tom		\$40.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77079		
-	upation / Job title (See Instructions)	Employer (See Instruction	s)
Architect	<u> </u>	Self	
Date	Full name of contributor out-of-state P	PAC (ID#:)	Amount of Contribution (\$)
07/18/2024	Matheson, John		\$50.00
	Contributor address; City; State; Zip Code		
	Canyon Lake, TX 78133		
Principal occl	upation / Job title (See Instructions)	Employer (See Instruction	
retired		retired	,
Date	Full name of contributor Out-of-state P	PAC (ID#:)	Amount of Contribution (\$)
07/18/2024	McClure, Maryann		\$25.00
	Contributor address; City; State; Zip Code		
	Canyon Lake, TX 78133		
	upation / Job title (See Instructions)	Employer (See Instruction	s)
retired		retired	
Date	Full name of contributor out-of-state P	PAC (ID#:)	Amount of Contribution (\$)
07/18/2024	McPhail, Janie		\$50.00
	Contributor address; City; State; Zip Code		
	Canyon Lake, TX 78133		
Princinal occu	upation / Job title (See Instructions)	Employer (See Instruction	
retired		retired	3)

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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 12/20 Rpt: 16/50	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		e (The Honorable)			00083642	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	08/09/2024	Meinecke, Michael				\$20.00
		6 Contributor address; City; State; Zip Code		1		
		Dripping Springs, TX 78620				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Senior Highw	way Designer	Jacobs Engineering			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Ι	Amount of Contribution (\$)	
	07/08/2024	Mike Toomey & Associates				\$1,000.00
				\mathbf{I}		
		Commodor address, ony, state, 21p source				
		Austin, TX 78701				
_	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ב)		
	r moipui ooca			5)		
╞	Date	Full name of contributor Out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	08/30/2024	Full name of contributor out-of-state PAC (ID#: Mis, Stephen	/			\$50.00
	00/30/2024					ψυ0.00
		Contributor address; City; State; Zip Code				
		New Braunfels, TX 78130				
┝	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	retired		retired	>)		
╞				_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	* 10.00
	09/13/2024	Moore, Robert H.				\$40.00
		Contributor address; City; State; Zip Code				
		Now Drawfala, TV 70100				
	Duin singl oppu	New Braunfels, TX 78132	Encloser (Cas Instructions	Ĺ		
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	07/01/2024	Moore III, Robert]		\$50.00
		Contributor address; City; State; Zip Code]		
		New Braunfels, TX 78132				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	retired		retired			

	The Instru	ction Guide explains how to complete this fo	orm.	1	Fotal pages Schedule A1: Sch: 13/20 Rpt: 17/50	
2	FILER NAME			3 F	Filer ID (Ethics Commission	ı Filers)
	Isaac, Carrie	e (The Honorable)		0	00083642	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7 A	Amount of Contribution (\$)	
	08/30/2024	Munro, Douglas				\$20.00
		6 Contributor address; City; State; Zip Code		1		
		Driftwood, TX 78619				
8	Principal occu Sr. Risk Ana		9 Employer (See Instructions FTI Consulting	s)		
	Date	Full name of contributor out-of-state PAC (ID#:)	A	Amount of Contribution (\$)	
	09/07/2024	Munro, Douglas				\$20.00
		Contributor address; City; State; Zip Code	1	1		
		Diffused TV 70610				
┡		Driftwood, TX 78619 pation / Job title (See Instructions)	Employer (See Instructions			
	Sr. Risk Ana		FTI Consulting	5)		
╞						
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	#20.00
	09/14/2024	Munro, Douglas				\$20.00
		Contributor address; City; State; Zip Code Driftwood, TX 78619				
┝	Drincinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u></u>		
	Sr. Risk Ana		FTI Consulting	5)		
⊢	Date	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	
	09/13/2024	Nuccio, Chris	/	<i>'</i>		\$250.00
	00,10,202.	Contributor address; City; State; Zip Code		·-		Ψ200.00
		Continuation address, City, State, Zip Code				
		Dripping Springs, TX 78620				
\square	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Insurance	ļ	CLN ventures Corporation	ion		
F	Date	Full name of contributor out-of-state PAC (ID#:)	A	Amount of Contribution (\$)	
	07/04/2024	One Gas Inc Political Action Committee				\$500.00
		Contributor address; City; State; Zip Code		1		
		Tulsa, OK 74103				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		

The Instru	ction Guide explains how to complete t	his form.	1 Total pages Schedule A1: Sch: 14/20 Rpt: 18/50
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	e (The Honorable)		00083642
4 Date	5 Full name of contributor out-of-state PAC	C (ID#:)	7 Amount of Contribution (\$)
07/18/2024	Owen, Dennis		\$50.00
	6 Contributor address; City; State; Zip Code		1
Dringingloccu	Canyon Lake, TX 78133 upation / Job title (See Instructions)	9 Employer (See Instructions	
retired		retired	5)
	Full name of contributor Out-of-state PAC		Amount of Contribution (\$)
Date 07/10/2024		C (ID#:)	Amount of Contribution (\$) \$100.00
01/10/2024			φ100.00
	Contributor address; City; State; Zip Code		
	Wimberley, TX 78676		
Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions]s)
Insurance A		Self	
Date	Full name of contributor X out-of-state PAC	I C (ID#: 00513549)	Amount of Contribution (\$)
09/04/2024	Phillips 66 PAC		\$1,000.66
	Contributor address; City; State; Zip Code		
	Washington, DC 20004		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)
Date	Full name of contributor out-of-state PAC	; (ID#:)	Amount of Contribution (\$)
09/05/2024			\$250.00
	Contributor address; City; State; Zip Code		
	San Marcos, TX 78666		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)
owner,DC		Ply Family Wellness	-,
Date	Full name of contributor Out-of-state PAC	(ID# [.])	Amount of Contribution (\$)
08/15/2024	Pool, Trent	, (12),	\$1,000.00
	Contributor address; City; State; Zip Code		
	Dripping Springs, TX 78620		
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)
consultant		public appeal	

		1	1 Total pages Schedule A1:	
The Instru	iction Guide explains how to complete this f	orm.	Sch: 15/20 Rpt: 19/50	
2 FILER NAME			3 Filer ID (Ethics Commission F	-ilers)
	e (The Honorable)		00083642	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
07/18/2024	Pool, William		· · · · · · · · · · · · · · · · · · ·	\$100.00
	6 Contributor address; City; State; Zip Code]	
	Wimberley, TX 78676			
	upation / Job title (See Instructions)	9 Employer (See Instructions	3)	
professor		Texas State Univ		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
07/18/2024				\$20.00
	Contributor address; City; State; Zip Code]	
	Canyon Lake, TX 78133			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	-)	
content crea	· · · ·	self	»)	
Date			Amount of Contribution (\$)	
Date 09/04/2024			Amount of Contribution (\$)	\$100.00
001071202.	Contributor address; City; State; Zip Code			Φ100.00
	CUITIBUTION address, City, State, 219 Cours			
l	Wimberley, TX 78676			
Principal occı	upation / Job title (See Instructions)	Employer (See Instructions	s)	
Retired		Retired		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/18/2024	Regan, Tim			\$10.00
l	Contributor address; City; State; Zip Code	1	1	
l				
l	San Marcos, TX 78666			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u></u>	
retired		retired	>)	
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	
07/31/2024		/		\$500.00
01102.2	Contributor address; City; State; Zip Code			ΨΟΟΟΙΙ
l	Quitman, TX 75783			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)	
l				

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	The Instru	ction Guide explains how to	o complete this fe	orm.	1	Total pages Schedule A1: Sch: 16/20 Rpt: 20/50	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
		e (The Honorable)				00083642	,
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	07/01/2024	Richardson, Julie					\$50.00
	I	6 Contributor address; City; State			1		
		New Braunfels, TX 78132					
0	Drincinal occu	upation / Job title (See Instructions)	,	Employer (See Instructions	$\sum_{i=1}^{n}$		
ö	retired	pation / Job lille (See Instructions)		9 Employer (See Instructions retired	3)		
<u> </u>					—		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	±=20.00
	09/05/2024	Rose, Korey					\$500.00
		Contributor address; City; State]		
		New Braunfels, TX 78132			Ļ		
		upation / Job title (See Instructions)		Employer (See Instructions			
	owner			Rose Family Chiropracti			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	07/04/2024	Rural Friends of Electric Coo	operatives				\$1,000.00
	1	Contributor address; City; State	e; Zip Code		1		
		Austin, TX 78701					
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/20/2024	Sampson Public Affairs LLC	,				\$500.00
	I	Contributor address; City; State	e; Zip Code		1		
		Austin, TX 78701					
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions	5)		
				l			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/05/2024	Scott, Wendy	•				\$260.00
	I	Contributor address; City; State	e; Zip Code		1		
		-					
		New Braunfels, TX 78132					
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
	DC			Stamps Chiropractic			
⊢							

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 17/20 Rpt: 21/50	
2 FILER NAME			3 Filer ID (Ethics Commission	on Filers)
	e (The Honorable)		00083642	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
07/16/2024	1 3			\$20.00
	6 Contributor address; City; State; Zip Code			
	Wimberley, TX 78676			
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	5)	
CPA		Army Residence Comm	unity	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
08/16/2024	Shoger, Gordon			\$20.00
00/10/2024				Ψ20.00
	Contributor address; City; State; Zip Code			
	Wimberley, TX 78676			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;	
CPA		Army Residence Comm	unity	
Date	Full name of contributor Out-of-state PAC (ID#:	\	Amount of Contribution (\$)	
)		¢00.00
09/16/2024	Shoger, Gordon			\$20.00
	Contributor address; City; State; Zip Code			
	Wimberley, TX 78676			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	3)	
CPA		Army Residence Comm	unity	
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/04/2024)		\$115.00
07/04/2024	Sjolseth, Brian			ΦIT2.00
	Contributor address; City; State; Zip Code			
	Dripping Springs, TX 78620			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	3)	
Retired		Self		
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)	
)		¢2 E00 00
07/08/2024	Sledgelaw Group PLLC			\$2,500.00
	Contributor address; City; State; Zip Code			
	Austin, TX 78766			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)	

F				1	Total pages Schodule A1:	
	The Instru	ction Guide explains how to complete this f	orm.	ľ	Total pages Schedule A1: Sch: 18/20 Rpt: 22/50	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	Isaac, Carrie	e (The Honorable)			00083642	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/05/2024	Stamps, Lisa				\$250.00
		6 Contributor address; City; State; Zip Code				
		New Braunfels, TX 78130				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	;)		
	co-owner		Stamps Chiropractic			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	07/04/2024	Stan Schlueter Consulting				\$1,000.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78768				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	07/13/2024	Stone, Tamara				\$50.00
		Contributor address; City; State; Zip Code				
		New Braunfels, TX 78130	,			
		upation / Job title (See Instructions)	Employer (See Instructions	;)		
L	Medical Cod	ding Ed. Consultant	UTHSCSA			
Γ	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	08/13/2024	Stone, Tamara				\$50.00
		Contributor address; City; State; Zip Code	,			
L		New Braunfels, TX 78130		L		
	•	upation / Job title (See Instructions)	Employer (See Instructions	;)		
L	Medical Cou	ding Ed. Consultant	UTHSCSA	_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	_
	09/13/2024	Stone, Tamara				\$50.00
		Contributor address; City; State; Zip Code				
⊢	<u> </u>	New Braunfels, TX 78130		Ĺ		
		upation / Job title (See Instructions)	Employer (See Instructions	;)		
	Medical Cou	ding Ed. Consultant	UTHSCSA			

Th	ne Instru	ction Guide explains how to complete this f	iorm.		Total pages Schedule A1: Sch: 19/20 Rpt: 23/50	
2 FIL	ER NAME		ļ	_	Filer ID (Ethics Commissio	on Filers)
		e (The Honorable)			00083642	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
4 Dat	ite	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
07 /	/18/2024	Stubbs, James	1			\$25.00
	ł	6 Contributor address; City; State; Zip Code				
	ļ		1			
	ļ		1			
		Canyon Lake, TX 78133				
8 Prir	ncipal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
reti	tired		retired			
Dat	ite	Full name of contributor out-of-state PAC (ID#:)	T	Amount of Contribution (\$)	
09/	/12/2024	Sysco Corp. Good Government Committee Inc.				\$1,000.00
	ł	Contributor address; City; State; Zip Code				
	ļ		1			
	ļ	1	1			
	ļ	Houston, TX 77077	1			
Priı	ncipal occu	pation / Job title (See Instructions)	Employer (See Instructions	is)		
Dat	ite	Full name of contributor out-of-state PAC (ID#:)	T	Amount of Contribution (\$)	
07	/19/2024	TREPAC-Texas Realtors PAC				\$2,500.00
	ļ	Contributor address; City; State; Zip Code				
	ļ		1			
	ļ		1			
	ļ	Austin, TX 78768	1			
Pri	ncipal occu	pation / Job title (See Instructions)	Employer (See Instructions	IS)		
Dat	ite	Full name of contributor out-of-state PAC (ID#:)	T	Amount of Contribution (\$)	
07)	//07/2024	Texans for Lawsuit Reform PAC	!			\$2,500.00
1	ļ	Contributor address; City; State; Zip Code				
	ļ		1			
	ļ	1	1			
1	ļ	Austin, TX 78701	1			
Pri	ncipal occu	pation / Job title (See Instructions)	Employer (See Instructions	is)		
Dat	ite	Full name of contributor out-of-state PAC (ID#:)	T	Amount of Contribution (\$)	
09/	/25/2024	Texas Telephone Association PAC	!			\$1,500.00
1	ļ	Contributor address; City; State; Zip Code		.		
	ļ		1			
	ļ		1			
	ļ	Austin, TX 78701	1			
Pri	ncipal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
			<u>I</u>			
l						

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 20/20 Rpt: 24/50		
2	FILER NAME			3	Filer ID (Ethics Commission	on Filers)
	Isaac, Carrie	e (The Honorable)			00083642	
4	Date	5 Full name of contributor X out-of-state PAC (ID#:_	C00493502)	7	Amount of Contribution (\$)	
	09/26/2024	VSP Holding Company Inc. PAC				\$2,000.00
		6 Contributor address; City; State; Zip Code				
		Rancho Cordova, TX 95670				
8	Principal occu	I pation / Job title (See Instructions)	9 Employer (See Instructions	1 5)		
	·			,		
⊨	Date	Full name of contributor out-of-state PAC (ID#:_)	Г	Amount of Contribution (\$)	
	07/18/2024	Vistra Employee PAC of Vistra Corp)			\$1,000.00
	07/10/2024					φ1,000.00
		Contributor address; City; State; Zip Code				
		Irving, TX 75039				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Fincipal occu			>)		
⊨	Data			-		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	¢100.00
	07/04/2024	Watt, Becky				\$100.00
		Contributor address; City; State; Zip Code				
		Driftwood, TX 78619				
⊢	Dringing age		Employer (Cool Instructions	$\frac{1}{1}$		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
L	retired		retired			
1						
1						
1						

		EXPENDI	TURE CATEGORI	ES FOR BO	DX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	-	xpense I prials Expense I	Office Overhead Polling Expense Printing Expens Salaries/Wages	e /Contract Labor	Travel in District Travel Out of Dis	quipment & Related Expense				
1	Total pages Schedule F1:	ILER NAME				3 Filer ID	(Ethics Commission Filers)				
	Sch: 1/23 Rpt: 25/50	saac, Carrie (The Honc	rable)			00083642					
4	Date	Payee name									
	07/10/2024	AT&T Mobility									
6	Amount (\$)	Payee address; City; State; Zip Code									
	\$159.75	PO Box 6416									
		Carol Stream, IL 60197									
8	PURPOSE	Category (See Categories liste	d at the top of this sched	lule) (b)	Description						
	OF EXPENDITURE	Office Overhead/Rental				outside of Texas. Com	plete Schedule T.				
	EXPENDITORE					, TX, officeholder living					
					campaign mo	bile phone/data	a service				
_											
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder nam	e Off	fice sought		Office he	eld				
	Date	Payee name									
	08/01/2024	AT&T Mobility									
	Amount (\$)	Payee address; City;	State;	Zip Code							
	\$103.50	PO Box 6416									
		Carol Stream, IL 60197									
	PURPOSE	Category (See Categories liste	d at the top of this sched	lule) (b)	Description						
	OF EXPENDITURE	Office Overhead/Rental	Expense			outside of Texas. Com					
						, TX, officeholder living					
					campaign inc	bile phone/data	a Service				
	Complete ONLY if direct	andidate/Officeholder nam	e Off	fice sought		Office he	۱d				
	expenditure to benefit C/OF			live cought		0					
	Date	Payee name									
	07/05/2024	Adair, Katie									
	Amount (\$)	Payee address; City;	Stato:	Zip Code							
	\$800.00	310 Timbleweed Drive	State,	Zip Coue							
	\$000.00										
		(yle, TX 78640									
	PURPOSE	Category (See Categories liste	d at the top of this sched	lule) (b)	Description						
	OF EXPENDITURE	Office Overhead/Rental				outside of Texas. Com					
	EXPENDITORE					, TX, officeholder living					
					band for Fire	In the Sky cam	paıgn event				
				<u> </u>							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder nam	e Off	fice sought		Office he	eiu.				

			EXPENDITURE	CATEGORIE	ES FOR B	OX 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 Legal Services The Instruction Guid	C P Dense P S	Office Overhe Polling Expension Printing Exper Galaries/Wage	nse es/Contract Labor	Travel in District Travel Out of Dis	quipment & Related Expense	
1	Total pagas Cabadula F1	2 511 5 5 1		e espiane ne				(Ethios Commission Filors)
1	Total pages Schedule F1: Sch: 2/23 Rpt: 26/50		аме Carrie (The Honorable))			3 Filer ID 00083642	(Ethics Commission Filers)
4	Date	5 Payee n	ame					
	07/01/2024	Amazo	า					
6	Amount (\$) \$36.78	 7 Payee a PO Box Seattle 		State; Z	Zip Code			
8	PURPOSE	(a) Categor	(See Categories listed at the t	op of this schedu	ule) (b)	Description		
	OF EXPENDITURE		everage Expense			Check if Austin	outside of Texas. Com , TX, officeholder living • Fire in the Sky	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		e/Officeholder name	Offi	ce sought		Office he	eld
	Date	Payee n	ame					
	07/02/2024	Amazo	า					
	Amount (\$)	Payee a	ddress; City;	State: 2	Zip Code			
	\$36.78	PO Box	81226	, -				
			WA 98108					
	PURPOSE OF EXPENDITURE		Y (See Categories listed at the t everage Expense	op of this schedu	_{ile)} (b)	Check if Austin	outside of Texas. Com , TX, officeholder living • Fire in the Sky	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		e/Officeholder name	Offi	ce sought	i	Office he	eld
	Date	Payee n	ame					
	07/05/2024	Betak,						
	Amount (\$)	Payee a	ddress; City;	State: 2	Zip Code			
	\$300.00		Anderson St					
		Schule	nburg, TX 78956					
	PURPOSE OF EXPENDITURE		Y (See Categories listed at the t Dverhead/Rental Expe		ue) (b)	Check if Austin	outside of Texas. Com, , TX, officeholder living ley driver for pa	expense
	Complete ONLY if direct expenditure to benefit C/OF		e/Officeholder name	Offi	ce sought	I	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:	2 FILER NAME 3	B Filer ID (Ethics Commission Filers)							
	Sch: 3/23 Rpt: 27/50	Isaac, Carrie (The Honorable)	00083642							
4	Date 07/29/2024	5 Payee name Big Frog								
6	Amount (\$)	7 Payee address; City; State; Zip Code								
	\$1,104.15	5207 Brodie Lane STE 145 Austin, TX 78745								
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF	 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense campaign tshirts 								
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	Brechot, Olivia								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$540.00	200 Rolling Oaks Dr Driftwood, TX 78619								
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. rX, officeholder living expense f pay							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	08/02/2024	Brechot, Olivia								
	Amount (\$) \$540.00	Payee address;City;State;Zip Code200 Rolling Oaks Dr								
		Driftwood, TX 78619								
	PURPOSE OF EXPENDITURE		itside of Texas. Complete Schedule T. IX, officeholder living expense f pay							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

			EXPENDITURE CATEGOR	RIES 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 Legal Services The Instruction Guide explains I	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/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:	2 F			-	3	Filer ID (Ethics Commission Filers)				
	Sch: 4/23 Rpt: 28/50		saac, Carrie (The Honorable)				00083642				
4	Date	5 P	Payee name								
	09/03/2024		Brechot, Olivia								
6	Amount (\$)	7 P	Payee address; City; State;	Zip Co	le						
	\$540.00	2	00 Rolling Oaks Dr								
		C	Driftwood, TX 78619								
8	PURPOSE	(a) (Category (See Categories listed at the top of this sche	adula)	(b) Description						
-	OF		Salaries/Wages/Contract Labor	edule)		outsi	de of Texas. Complete Schedule T.				
	EXPENDITURE				Check if Austin	, TX,	officeholder living expense				
					campaign sta	aff p	bay				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name C	Office sou	Jht		Office held				
	experiature to benefit C/Or										
	Date	F	Payee name								
	08/19/2024	0	CCA (Coastal Conservation Association	n) Hill Co	ountry Chapter						
	Amount (\$)	F	Payee address; City; State;	Zip Co	le						
	\$100.00	6	919 Portwest Dr Ste 100								
		F	louston, TX 77024								
_	PURPOSE	(a) (Category (See Categories listed at the top of this sche	odulo)	(b) Description						
	OF		Contributions/Donations Made By	euule)		outsi	de of Texas. Complete Schedule T.				
	EXPENDITURE		Candidate/Officeholder/Political Comm	ittee	Check if Austin	, TX,	officeholder living expense				
					donation						
	Complete ONLY if direct		ndidate/Officeholder name C	Office sou	Jht		Office held				
	expenditure to benefit C/OF	4									
	Date	F	ayee name								
	07/19/2024	0	Cantina del Rio								
	Amount (\$)	F	Payee address; City; State;	Zip Co	le						
	\$47.07	1	299 Gruene Road								
		Ν	lew Braunfels, TX 78130								
	PURPOSE	(a) (Category (See Categories listed at the top of this sche	edule)	(b) Description						
			od/Beverage Expense	,	Check if travel	outsi	de of Texas. Complete Schedule T.				
	EXPENDITURE						officeholder living expense				
					campaign sta	tff li	unch				
	Complete ONLY if direct		ndidate/Officeholder name C	Office sou	Jht	_	Office held				
	expenditure to benefit C/OH										

			EXPENDITURE CATEGOR	RIES FOR	RBC	DX 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: 5/23 Rpt: 29/50		Isaac, Carrie (The Honorable)					00083642
4	Date	5	Payee name					
-	09/11/2024	-	Canyon Lake Professional Firefighter's	Associa	tior	n-CLPFFA Loo	cal 4	4713
6	Amount (\$)	7		Zip Co				-
ľ	\$50.00	ľ	PO Box 1943	Ζιρ Ου	ue			
	430.00							
			Conventation TV 70122					
_			Canyon Lake, TX 78133					
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description	outoi	de ef Teuros, Complete Cebedule T
	EXPENDITURE		Contributions/Donations Made By Candidate/Officeholder/Political Commi	ittoo				de of Texas. Complete Schedule T. , officeholder living expense
			Candidate/Onicerioide//Folitical Comm	illee		donation	,,	
9	Complete ONLY if direct		Candidate/Officeholder name O)ffice sou	ght			Office held
	expenditure to benefit C/OI	H						
-	Date		Payee name					
	07/14/2024		Christensen, Jan					
_				7: 0	-1 -			
	Amount (\$)			Zip Co	ae			
	\$500.00 502 Liveoak Dr							
			Johnson Clty, TX 78636					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description		
	EXPENDITURE		Salaries/Wages/Contract Labor					de of Texas. Complete Schedule T. , officeholder living expense
						campaign sta		
						cumpaign sto	mβ	Juy
	Complete ONLY if direct		Candidate/Officeholder name O	Office sou	aht			Office held
	expenditure to benefit C/OI				gin			
_	Data	1						
	Date 07/29/2024		Payee name Christensen, Jan					
	Amount (\$)			Zip Co	de			
	\$500.00		502 Liveoak Dr					
			Johnson Clty, TX 78636					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description		
	EXPENDITURE		Salaries/Wages/Contract Labor					de of Texas. Complete Schedule T. , officeholder living expense
						campaign sta		
						sampaign sto	υP	,
-	Complete ONLY if direct	Ľ	Candidate/Officeholder name O	Office sou	abt			Office held
	expenditure to benefit C/OI			111CE 200	ynt			
_								

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Cor	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing Ex Salaries/W	kpense /ages/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:	2			•	3	Filer ID (Ethics Commission Filers)			
-	Sch: 6/23 Rpt: 30/50	-	Isaac, Carrie (The Honorable)				00083642			
4	Date	5	Payee name							
	08/12/2024		Christensen, Jan							
6	Amount (\$)	7	Payee address; City; State	; Zip Co	de					
	\$500.00		502 Liveoak Dr							
			Johnson Clty, TX 78636							
8	PURPOSE	(a)	Category (See Categories listed at the top of this sch	hedule)	(b) Description					
	OF	Ľ	Salaries/Wages/Contract Labor	incudic)		vel outs	side of Texas. Complete Schedule T.			
	EXPENDITURE		-				K, officeholder living expense			
					campaign	staff	рау			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office sou	ght		Office held			
	Date		Payee name							
	08/27/2024		Christensen, Jan							
	Amount (\$)		Payee address; City; State	; Zip Co	de					
	\$500.00		502 Liveoak Dr							
			Johnson Clty, TX 78636							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sch Salaries/Wages/Contract Labor	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
					campaign	staff	рау			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office sou	ght		Office held			
	Date		Payee name							
	09/11/2024		Christensen, Jan							
	Amount (\$)		Payee address; City; State	; Zip Co	de					
	\$500.00		502 Liveoak Dr							
			Johnson CIty, TX 78636							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	hedule)	(b) Description					
	EXPENDITURE		Salaries/Wages/Contract Labor			stin, TX	side of Texas. Complete Schedule T. K, officeholder living expense pay			
-	Complete ONLY if direct	<u>ر</u>	Candidate/Officeholder name	Office sou	aht		Office held			
	expenditure to benefit C/Oł				J					
-										

	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: 7/23 Rpt: 31/50	Isaac, Carrie (The Honorable)	00083642								
4	Date 09/26/2024	5 Payee name Cranky Pickle									
6	Amount (\$) \$487.13	7 Payee address; City; State; Zip Code 624 Krueger Canyon New Braunfels, TX 78132									
8	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense venue deposit for campaign fundraiser										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held								
	Date	Payee name									
	07/01/2024	Cressent Nickes (Way to Go Insurance)									
	Amount (\$) \$57.00	Payee address; City; State; Zip Code Po Box 236									
	PURPOSE OF EXPENDITURE		nutside of Texas. Complete Schedule T. TX, officeholder living expense Fire in the Sky campaign event								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								
	Date	Payee name									
	07/08/2024	Direct Texas Marketing Group									
	Amount (\$) \$398.72	Payee address;City;State;Zip Code1260 S Business IH 35									
		New Braunfels, TX 78130									
	PURPOSE OF EXPENDITURE	Check if Austin,	nutside of Texas. Complete Schedule T. TX, officeholder living expense terhead and envelopes								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								

			EXPENDITURI	E CATEGOR	RIES FOR	BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		-	Expense	Office Over Polling Exp Printing Exp Salaries/Wa	oense ages/Contract Labor	sing Expense ipment & Related Expense ct tegory not listed above)		
			The Instruction Gu	ide explains	how to con	plete this form.	-		
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 8/23 Rpt: 32/50		saac, Carrie (The Honorabl	e)				00083642	
4	Date	5	Payee name						
	07/05/2024		Ethan Luckie						
6	Amount (\$)	7	Payee address; City;	State;	Zip Coo	le			
	\$300.00		351 Indian Wells		·				
			Sertram TX 78605						
_			Bertram, TX 78605						
8	PURPOSE OF		Category (See Categories listed at th		edule)	(b) Description			
	EXPENDITURE		Office Overhead/Rental Exp	ense				de of Texas. Comple officeholder living ex	
								driver for par	
						· · · · · · · · · · · · · · · · · · ·	,		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	С	Dffice soug	ht		Office held	l
	Date		Payee name						
	07/04/2024		Frances Fosdick						
				Ctoto	Zin Cor				
	Amount (\$)		Payee address; City;	State;	; Zip Coo	ie			
	\$1,600.00		P.O. Box 601						
			Dripping Springs, TX 78620						
	PURPOSE	(a)	Category (See Categories listed at th	e top of this sch	edule)	(b) Description			
	OF EXPENDITURE		=ood/Beverage Expense					de of Texas. Comple	
	-							officeholder living ex	
							iii u	ie Sky campa	lighteveni
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	Int		Office held	
	•								
	Date		Payee name						
	09/26/2024		Garcia's Mexican Restaurar	nt					
	Amount (\$)		Payee address; City;	State;	; Zip Coo	le			
	\$35.00		3820 Farm to Market Road	3009					
			Schertz, TX 78154						
	PURPOSE	(a)	Category (See Categories listed at th	e top of this sch	edule)	(b) Description			
	OF		=ood/Beverage Expense		,	Check if travel	outsi	de of Texas. Comple	te Schedule T.
	EXPENDITURE							officeholder living ex	kpense
						campaign sta	aff Iu	unch	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	ht		Office held	

		EXPENDITURE CATEGORIES FOR BOX 8(a	a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reim Fees Office Overhead/Renta Food/Beverage Expense Polling Expense Git/Awards/Memorials Expense Printing Expense mmittee Legal Services Salaries/Wages/Contra The Instruction Guide explains how to complete this Salaries/Wages/Contra	Il Expense Transportation Equipment & Related Expense Travel in District Travel Out of District Act Labor OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)							
	Sch: 9/23 Rpt: 33/50	Isaac, Carrie (The Honorable)	00083642							
4	Date 07/05/2024	Payee name Google GSuite								
6	Amount (\$) \$92.10	7 Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043								
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense campaign email/cloud storage										
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	Google GSuite								
	Amount (\$) \$92.10	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy								
	PURPOSE OF EXPENDITURE		cription heck if travel outside of Texas. Complete Schedule T. heck if Austin, TX, officeholder living expense paign email/cloud storage							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	09/01/2024	Google GSuite								
	Amount (\$) \$92.10	Payee address;City;State;Zip Code1600 Amphitheatre Pkwy								
		Mountain View, CA 94043								
	PURPOSE OF EXPENDITURE		cription heck if travel outside of Texas. Complete Schedule T. heck if Austin, TX, officeholder living expense paign email/cloud storage							
ļ	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		Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Office Over Polling Exp Printing Exp Salaries/Wa	oense ages/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:	2	· · ·			2	Filer ID (Ethics Commission Filers)			
1	Sch: 10/23 Rpt: 34/50		Isaac, Carrie (The Honorable)			3	00083642			
4	Date	5	Payee name							
	07/03/2024		Hays County Recycling							
6	Amount (\$)	7	Payee address; City; State;	Zip Coo	le					
	\$40.00		1619 Carney Ln							
			Wimberley, TX 78676							
8	PURPOSE		-		(b) Decemination					
°	OF		Category (See Categories listed at the top of this sched Office Overhead/Rental Expense	dule)	(b) Description Check if travel	outsi	ide of Texas. Complete Schedule T.			
	EXPENDITURE		Onice Overneau/Rentai Expense				, officeholder living expense			
					recycling fee	for	old campaign signs			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Of	fice soug	ht		Office held			
	Date		Payee name							
	09/09/2024		Jack Allen's Kitchen							
_	Amount (\$)		Payee address; City; State;	Zip Coo	le					
	\$48.39		7720 Hwy 71 West		-					
	+ 10.00									
			Austin, TX 78735							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sched Food/Beverage Expense	dule)		, TX	ide of Texas. Complete Schedule T. , officeholder living expense unch			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Of	fice soug	ht		Office held			
	Date		Payee name							
	08/09/2024		Knights of Columbus Council 11695							
	Amount (\$)		Payee address; City; State;	Zip Coo	le					
	\$260.15		10120 Clemente Cir	•						
			Austin, TX 78737							
	PURPOSE OF		Category (See Categories listed at the top of this sched	dule)	b) Description					
	EXPENDITURE		Contributions/Donations Made By Candidate/Officeholder/Political Commit	ttee			ide of Texas. Complete Schedule T. , officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		candidate/Officeholder name Of	fice soug	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	/ - Il Con	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Loan Repa Office Ove Polling Exp Printing Ex Salaries/W	ayment/Reimbursement rhead/Rental Expense pense xpense /ages/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:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)			
	Sch: 11/23 Rpt: 35/50		Isaac, Carrie (The Honorable)				00083642			
4	Date 07/02/2024		Payee name Mail Chimp							
6	Amount (\$) \$117.26	7 Payee address; City; State; Zip Code 675 Ponce de Leon Ave NE, Suite 5000 Atlanta, GA 30308								
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Image: Check if Austin, TX, officeholder living expense campaign email service							officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name C	Office sou	ght		Office held			
	Date		Payee name							
	08/02/2024		Mail Chimp							
	Amount (\$)Payee address; City; State; Zip Code\$117.26675 Ponce de Leon Ave NE, Suite 5000									
			Atlanta, GA 30308							
PURPOSE OF EXPENDITURE						in, TX	outside of Texas. Complete Schedule T. TX, officeholder living expense ail service			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name C	Office sou	ght		Office held			
	Date		Payee name							
	09/02/2024		Mail Chimp							
	Amount (\$) \$117.26		Payee address; City; State 675 Ponce de Leon Ave NE, Suite 500	; Zip Co 00	de					
			Atlanta, GA 30308							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sch Office Overhead/Rental Expense	edule)		in, TX	ide of Texas. Complete Schedule T. , officeholder living expense Service			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name C	Dffice sou	ght		Office held			

			EXPENDITURE CATEGO	RIES FOF	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 Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing Ex Salaries/W	pense ages/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:	2	·			3	Filer ID (Ethics Commission Filers)				
	Sch: 12/23 Rpt: 36/50		Isaac, Carrie (The Honorable)				00083642				
4	Date	5	Payee name								
	07/12/2024		National Association of Christian Lawn	nakers (N	IACL)						
6	Amount (\$)	7	Payee address; City; State	; Zip Co	de						
	\$100.00		P.O. Box 10388								
			Conway, AR 72034								
8	PURPOSE	(a)	Category (See Categories listed at the top of this sch	odulo)	(b) Description						
	OF	ľ	Office Overhead/Rental Expense	ieuuie)		outs	ide of Texas. Complete Schedule T.				
	EXPENDITURE		·			ı, TX	, officeholder living expense				
					membership						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	yht		Office held				
	Date		Payee name								
	07/31/2024		National Center for Constitutional Stud	lies							
	Amount (\$)		Payee address; City; State	; Zip Co	de						
	\$1,265.00 37777 W Juniper Rd										
			Malta, ID 83342								
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	nedule)	(b) Description						
	EXPENDITURE		Office Overhead/Rental Expense				ide of Texas. Complete Schedule T. , officeholder living expense				
							ions for campaign to distribute				
					poonor conor	itut	ione for barnpaigh to alothbato				
\vdash	Complete ONLY if direct		Candidate/Officeholder name	Dffice sou	aht		Office held				
	expenditure to benefit C/OF	H									
⊨	Date		Payee name								
	08/26/2024		National Center for Constitutional Stud	lies							
	Amount (\$)		Payee address; City; State	; Zip Co	le						
	\$118.00		37777 W Juniper Rd	, בוף סט							
	\$110.00										
			Malta, ID 83342								
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	redule)	(b) Description						
	OF EXPENDITURE		Office Overhead/Rental Expense				ide of Texas. Complete Schedule T.				
							, officeholder living expense				
					pocket const	nut	ions for campaign to distribute				
	Complete ONIL V if direct	Ľ	Condidate/Officeholder nom-	Office car	xht		Office hold				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	JIIL		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:		3 Filer ID (Ethics Commission Filers)								
-	Sch: 13/23 Rpt: 37/50	Isaac, Carrie (The Honorable) 00083642									
4	Date 07/26/2024	Payee name OSO Marketing LLC									
6	Amount (\$)										
0	\$354.28	7 Payee address; City; State; Zip Code 28 237 Limestone Trail Austin, TX 78737									
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description									
	OF EXPENDITURE Office Overhead/Rental Expense Check if Austin, TX, officeholder living expense Texas House seal stickers for campaign										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held								
	Date	Payee name									
	07/01/2024	Office Depot									
	Amount (\$)	Payee address; City; State; Zip Code									
	\$146.12	1050 North IH-35 New Braunfels, TX 78130									
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense Fire in the Sky campaign event								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held								
-	Date	Payee name									
	07/02/2024	Pick, Teresa									
	Amount (\$)	Payee address; City; State; Zip Code									
	\$250.00	155 Pinnacle Pkwy									
		New Braunfels, TX 78132									
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense ff pay								
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	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: 14/23 Rpt: 38/50	Isaac, Carrie (The Honorable)	00083642
4	Date 08/02/2024	5 Payee name Pick, Teresa	
6	Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 155 Pinnacle Pkwy New Braunfels, TX 78132	
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense ff pay
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	09/03/2024	Pick, Teresa	
	Amount (\$) \$250.00	Payee address; City; State; Zip Code 155 Pinnacle Pkwy New Braunfels, TX 78132	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	outside of Texas. Complete Schedule T. TX, officeholder living expense ff pay
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	09/03/2024	Poncho	
	Amount (\$) \$373.26	Payee address; City; State; Zip Code 3106 Longhorn Blvd	
		Austin, TX 78758	
	PURPOSE OF EXPENDITURE	Check if Austin,	outside of Texas. Complete Schedule T. TX, officeholder living expense rts for staff and volunteers
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

			EXPENDITURE CATE	EGOF	RIES FOR	BC	DX 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 Legal Services The Instruction Guide expl	lains	Office Over Polling Exp Printing Ex Salaries/W	heac ense pense ages	e /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:	2	FILER NAME					3	Filer ID (Ethics Commission Filers)		
	Sch: 15/23 Rpt: 39/50		Isaac, Carrie (The Honorable)						00083642		
4	Date 07/01/2024	5	Payee name Print Plus								
6	Amount (\$) \$94.24	7 Payee address; City; State; Zip Code \$94.24 222 Hwy 290 W, Dripping Springs, TX 78620									
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description 							, officeholder living expense				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	ght			Office held		
	Date		Payee name								
	07/02/2024		QR.io generator								
	Amount (\$) \$35.00		Payee address; City; S 9450 SW Gemini Dr	State;	; Zip Coo	de					
			Beaverton, OR 97008			<u> </u>					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of the Office Overhead/Rental Expense	nis sch	edule)		Check if Austin	, TX,	ide of Texas. Complete Schedule T. , officeholder living expense Ode generator		
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Dffice soug	ght			Office held		
	Date		Payee name								
	08/05/2024		QR.io generator								
	Amount (\$) \$35.00		Payee address; City; S 9450 SW Gemini Dr	State;	; Zip Coo	de					
			Beaverton, OR 97008								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of the Office Overhead/Rental Expense	nis sch	edule)		Check if Austin	, тх,	ide of Texas. Complete Schedule T. , officeholder living expense Ode generator		
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght			Office held		

			EXPENDITU	RE CATEGO	RIES 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 Expe Gift/Awards/Memoria Legal Services The Instruction C	s Expense	Office Overl Polling Expe Printing Exp Salaries/Wa	ense ges/Contract Labor	Transport Travel in Travel Ou	tation Eq District ut of Distr	uising Expense uipment & Related Expense ict ategory not listed above)			
1	Total pages Schedule F1:	2 FILE	R NAME				3 Filer ID)	(Ethics Commission Filers)			
	Sch: 16/23 Rpt: 40/50		c, Carrie (The Honora	ble)			00083					
4	Date 09/11/2024		e name rCity Screenprinting &	Embroidery	/							
6	Amount (\$)											
U	\$1,775.83		1705 S Interstate 35									
		San	Marcos, TX 78666									
8	PURPOSE OF EXPENDITURE	OF Advertising Expense										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		date/Officeholder name	(Office soug	ht	Off	ice hel	d			
	Date	Paye	e name									
	07/03/2024	San	's Club									
	Amount (\$)	Pave	e address; City;	State	; Zip Cod	e						
	\$493.59	-) Leah Ave									
		San	Marcos, TX 78666									
	PURPOSE OF EXPENDITURE		gory (See Categories listed at d/Beverage Expense	the top of this sch	nedule) (outside of Texa n, TX, officehold e in the Sk	er living e	expense			
	Complete ONLY if direct expenditure to benefit C/O		date/Officeholder name	(Office soug	ht	Off	ice hel	d			
	Date	Pave	e name									
	07/03/2024		i's Club									
	Amount (\$) \$26.95		ee address; City;) Leah Ave	State	; Zip Cod	e						
		San	Marcos, TX 78666									
	PURPOSE OF EXPENDITURE		gory (See Categories listed at e Overhead/Rental E		nedule) (Check if Austir	outside of Texa n, TX, officehold Fire in the S	er living e				
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		date/Officeholder name	(Office soug	ht	Off	ice hel	d			

	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 nmittee Legal Services The Instruction Guide explains	Office Ov Polling Ex Printing E Salaries/V	erhea (pense (xpens Vages	se s/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:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)				
	Sch: 17/23 Rpt: 41/50		Isaac, Carrie (The Honorable)					00083642				
4	Date	5	Payee name									
	07/25/2024		Shoal Creek Saloon									
6	Amount (\$)	7	Payee address; City; State; Zip Code									
	\$94.84	\$94.84 909 N Lamar Blvd										
			Austin, TX 78703									
8	PURPOSE	(a)	Category (See Categories listed at the top of this so	hedule)	(b)	Description						
	OF		Food/Beverage Expense	incluic)		-	outsi	de of Texas. Complete Schedule T.				
	EXPENDITURE		5					officeholder living expense				
						capitol staff lu	unc	h				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ight			Office held				
_	Date	<u> </u>	D									
	08/14/2024		Payee name									
			Sophienburg Museum									
	Amount (\$)			e; Zip Co	ode							
	\$500.00 401 W Coll St											
			New Braunfels, TX 78130									
	PURPOSE	(a)	Category (See Categories listed at the top of this so	chedule)	(b)	Description						
	OF EXPENDITURE		Contributions/Donations Made By					de of Texas. Complete Schedule T.				
			Candidate/Officeholder/Political Com	nittee			, TX,	officeholder living expense				
						Sponsorship						
				0.000								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ignt			Office held				
_	Data	_	D									
	Date 07/16/2024		Payee name Southwest Airlines									
	Amount (\$)			e; Zip Co	bde							
	\$11.20		P.O. Box 36611									
			Dallag TV 75025									
			Dallas, TX 75235									
	PURPOSE OF	(a)	Category (See Categories listed at the top of this so	chedule)	(b)	Description	ou .+	do of Toylog, Complete Cabadula T				
	EXPENDITURE		Travel Out of District					de of Texas. Complete Schedule T. officeholder living expense				
						travel to atter						
								-				
-	Complete ONLY if direct	L(Candidate/Officeholder name	Office sou	L Jaht			Office held				
	expenditure to benefit C/Oł			200 000	. g. n							
-												

			EXPENDITURE CATEGOR	RIES 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 Legal Services The Instruction Guide explains h	Office Over Polling Exp Printing Ex Salaries/W	oense ages/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:	2	•		•	3	Filer ID (Ethics Commission Filers)				
-	Sch: 18/23 Rpt: 42/50		Isaac, Carrie (The Honorable)				00083642				
4	Date 07/21/2024		Payee name Spark By Hilton Grand Prairie								
6	Amount (\$) \$431.44		7 Payee address; City; State; Zip Code 2050 N Highway 360 Grand Prairie, TX 75050								
 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense hotel for Representative and volunteers to attend event in Arlington, TX 							officeholder living expense entative and volunteers to attend				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O)ffice souç	ht		Office held				
	Date		Payee name								
	07/19/2024		Squarespace Inc								
	Amount (\$) \$294.22		Payee address; City; State; 225 Varick St 12th Floor New York, NY 10014	Zip Coo	le						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Office Overhead/Rental Expense	edule)	Check if Austin	ı, ТХ,	de of Texas. Complete Schedule T. . officeholder living expense n website subscription				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O	Office soug	ht		Office held				
	Date		Payee name								
	09/20/2024		Steve Kinard Campaign								
	Amount (\$) \$2,500.00	I	Payee address; City; State; P.O. Box 260464	Zip Coo	le						
			Plano, TX 75026								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Contributions/Donations Made By Candidate/Officeholder/Political Commi	,			de of Texas. Complete Schedule T. officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O	Office soug	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	/ - Il Com	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expen nittee Legal Services The Instruction Guide e		Office Over Polling Exp Printing Exp Salaries/Wa	ense Iges/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:	2	ILER NAME				3	Filer ID (Ethics Commission Filers)		
	Sch: 19/23 Rpt: 43/50		saac, Carrie (The Honorable)					00083642		
4	Date 07/31/2024		Payee name Fahuahua, Katie							
6	Amount (\$) \$200.00	:	Payee address; City; .88 South Sage Hollow Dripping Springs, TX 78620	State;	; Zip Coc	e				
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top Salaries/Wages/Contract Labor		edule)		η, TX,	ide of Texas. Complete Schedule T. , officeholder living expense DAY		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	ht		Office held		
	Date		Payee name							
	08/31/2024	-	Tahuahua, Katie							
	Amount (\$) \$100.00	I	Payee address; City; .88 South Sage Hollow	State;	; Zip Coc	e				
	PURPOSE		Dripping Springs, TX 78620							
	OF EXPENDITURE		Category (See Categories listed at the top Salaries/Wages/Contract Labor		edule)		ι, TX,	ide of Texas. Complete Schedule T. , officeholder living expense DAY		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	ht		Office held		
	Date		Payee name							
	07/01/2024	•	Texans for Medical Freedom							
	Amount (\$) \$1,000.00		Payee address; City; .321 W Randol Mill Road Suite		; Zip Coc	e				
		,	Arlignton, TX 76012							
	PURPOSE OF EXPENDITURE	(Category (See Categories listed at the top Contributions/Donations Made C Candidate/Officeholder/Political	By				ide of Texas. Complete Schedule T. , officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	ht		Office held		

			EXPEND	TURE CATEGO	RIES FOR	BOX 8(a)	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee	Event Expense Fees Food/Beverage Gift/Awards/Men Legal Services The Instructi		Office Over Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		Transportation E Travel in District Travel Out of Dis								
1	Total pages Schedule F1:	2 FILE	R NAME				3	Filer ID	(Ethics Commission Filers)							
	Sch: 20/23 Rpt: 44/50		c, Carrie (The Hon	orable)				00083642								
4	Date	5 Pave	Payee name													
	07/31/2024		Texas Chili Parlor													
6	Amount (\$)	Payee address; City; State; Zip Code														
	\$72.89	.89 1409 Lavaca St														
		Aust	Austin, TX 78701													
8	PURPOSE	(a) Cate	JORY (See Categories list	ad at the tap of this ash	adula)	(b) Description										
-	OF		I/Beverage Expens		ledule)		outs	ide of Texas. Com	nplete Schedule T.							
	EXPENDITURE							, officeholder living	g expense							
						capitol staff l	unc	ch								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		late/Officeholder nan	ne C	Office souç	ht		Office h	eld							
	Date	Paye	e name													
	09/25/2024	Теха	s Federation of Re	epublican Wome	en											
	Amount (\$)	Paye	e address; City;	State	; Zip Co	le										
	\$500.00	POE	Box 171146													
		Aust	in, TX 78717													
	PURPOSE OF		OORY (See Categories list	ed at the top of this sch	nedule)	(b) Description		ide of Tourse Oom								
	EXPENDITURE	Adve	ertising Expense					, officeholder living	nplete Schedule T. g expense							
						sponsorship	.,	,	5 - · · · · · · ·							
	Complete ONLY if direct	Candio	late/Officeholder nan	ne (Office soug	Iht		Office h	eld							
	expenditure to benefit C/OI															
⊨	Date	Pave	e name													
	08/30/2024	-	s Gun Rights													
	Amount (\$)		e address; City;	State	; Zip Co	le										
	\$36.77		Box 1776	Otato	, בוף פטע											
	+•••••															
		Wea	therford, TX 76086	j												
	PURPOSE	(a) Cate	gory (See Categories list	ed at the top of this sch	nedule)	(b) Description										
	OF EXPENDITURE	Fees	5						nplete Schedule T.							
		Check if Austin, TX, officeholder living expense officeholder membership renewal														
						UNCENDIUELI	nel		iewai							
	Complete ONLV if direct	Candid	late/Officeholder nan	10 (Office soug	lht		Office h	old							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF			іс (Surce Soul	pric		Unice h	ธเน							

		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/Reimburse Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Lal	ense Transportation Equipment & Related Expense Travel in District Travel Out of District bor OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)							
	Sch: 21/23 Rpt: 45/50	Isaac, Carrie (The Honorable)	00083642							
4	Date 09/20/2024	Payee name Texas Right To Life								
6	Amount (\$) \$530.43	7 Payee address; City; State; Zip Code PO Box 36560 Houston, TX 77236								
8	PURPOSE OF EXPENDITURE	OF Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	09/10/2024	The Capitol Grill								
	Amount (\$) \$10.74	Payee address; City; State; Zip Code 1400 Congress Ave Austin, TX 78701								
	PURPOSE OF EXPENDITURE		ON if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense Ider lunch							
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	07/10/2024	The Flower Girl								
	Amount (\$) \$92.01	Payee address;City;State;ZipCode1039 Sunset Canyon Dr S								
		Dripping Springs, TX 78620								
	PURPOSE OF EXPENDITURE		on if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense for constituent funeral							
	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/Reimb Fees Office Overhead/Rental Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract The Instruction Guide explains how to complete this	Expense Transportation Equipment & Related Expense Travel in District Travel Out of District t Labor OTHER (enter a category not listed above)								
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)								
	Sch: 22/23 Rpt: 46/50	Isaac, Carrie (The Honorable)	00083642								
4	Date 08/26/2024	Payee name US Postal Service									
6	Amount (\$)	Payee address; City; State; Zip Code									
	\$146.00	651 N. IH 35 Ste 420									
		New Braunfels, TX 78130									
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense campaign postage Image: Check if Austin, TX, officeholder living expense											
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought	Office held								
	Date	Payee name									
	07/01/2024	Wimberley Village Library									
	Amount (\$)	Payee address; City; State; Zip Code									
	\$5.80	400 FM-2325 Wimberley, TX 78676									
	PURPOSE OF EXPENDITURE	printing Expense	ription eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense ng fee for Fire in the Sky campaign event etags								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								
	Date	Payee name									
	08/24/2024	XX-XY Athletics									
	Amount (\$)	Payee address; City; State; Zip Code									
	\$78.48	700 Vernon Avenue									
		Glencoe, IL 60022									
	PURPOSE OF EXPENDITURE		ription eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense or house colleague								
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held								

				EXPENDITURE CA	TEGORIES	SFOR	3OX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Codi Cord Darmant		nmittee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expens Legal Services	Offi Pol e Prir	ice Overh lling Expe nting Expe			Travel in District Travel Out of Dis	quipment & Related Exp	
	Credit Card Payment			The Instruction Guide ex	plains how	to com	plete this form.				
1	Total pages Schedule F1:	2	FILER NAM	Ē				3	Filer ID	(Ethics Commissio	n Filers)
	Sch: 23/23 Rpt: 47/50		Isaac, Carr	ie (The Honorable)					00083642		
4	Date	5	Payee name								
	09/25/2024		Zozo's								
6	Amount (\$)	7	Payee addre	ss; City;	State; Zi	n Cod	2				
Ŭ	\$400.00	Ľ	3906 Pearo	-		p 000					
	φ+00.00		55001 earc								
			Austin, TX	78730							
8	PURPOSE	(a)	Category (S	ee Categories listed at the top o	f this schedule	_{e)} (I) Description				
	OF EXPENDITURE		Office Over	head/Rental Expense	;				de of Texas. Com		
	-								officeholder living	expense npaign fundrais	or
							prize for with	mig	j lean al cai	ilpaigir iuriurais	EI
•	Operation ONITY if diverse				0				041	1.1	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	H	Jandidate/Off	iceholder name	Office	e sougł	IT		Office he	210	

	RRED OBLIGATIONS	SCHEDULE F2
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	EXPENDITURE CATEGORIES FOR BOX 10(a) Event Expense Fees Food/Beverage Expense I Committee Eugal Services Expense Food/Beverage Food/Beverage Expense Food/Beverage Expense Food/Beverage Food/	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 F2: Sch: 1/1 Rpt: 48/50		3 Filer ID (Ethics Commission Filers) 00083642
⁴ TOTAL OF UNITEMI	ZED UNPAID INCURRED OBLIGATIONS	\$
 5 Date 09/26/2024 7 Amount (\$) \$1,185.43 	 6 Payee name Isaac, Carrie 8 Payee address; City; State; Zip Code 114 Augusta Lane 	
	Wimberley, TX 78676	
9 TYPE OF EXPENDITURE	X Political Non-Political	
10 PURPOSE OF EXPENDITURE	outside of Texas. Complete Schedule T. TX, officeholder living expense JISEMENT	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

	The Instru	cti	on Guide explains how to complete this form.			ages Schedule K: ./1 Rpt: 49/50
2	FILER NAME					0 (Ethics Commission Filers)
	Isaac, Carrie		he Honorable)		00083	
4	Date	5	Name of person from whom amount is received			8 Amount (\$)
	07/10/2024		Sam's Club			\$83.00
		6	Address of person from whom amount is received; City; State; Zip Code			
			San Marcos, TX 78666			
		7		olitic	al cont	l ribution returned to filer
		ľ	refund for drinks for Fire in the Sky campaign event	Jonue		
⊢						

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

The Instruction Guide explains how to complete this form. 1 Total pages Schedule T: Sch: 1/1 Rpt: 50/50 2 FILER NAME Isaac, Carrie (The Honorable) 3 Filer ID (Ehics Commission Filers) 00083642 4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee Southwest Airlines 3 Filer ID (Ehics Commission Filers) 00083642 5 Contribution / Expenditure reported on: Schedule A2 Schedule B Schedule B(J) Schedule C2 Schedule D X Schedule F1 Schedule F2 Schedule F4 Schedule G Schedule H Schedule COH-UC 6 Dates of Travel 7 Name of person(s) traveling Isaac, Carrie Beparture city or name of departure location Austin 9 Departure city or name of departure location Denver 10 Means of transportation Commercial Airplane 11 Purpose of travel (including name of conference, seminar, or other event) attend ALEC conference 11 Purpose of travel (including name of conference, seminar, or other event)
Isaac, Carrie (The Honorable) 00083642 4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee Southwest Airlines 5 5 Contribution / Expenditure reported on: Schedule A2 Schedule A2 Schedule B Schedule F2 Schedule F4 Schedule F2 Schedule F4 Schedule G Schedule H Isaac, Carrie Schedule G 8 Departure city or name of departure location 07/23/2024 9 9 Destination city or name of destination location 07/26/2024 11 10 Means of transportation
4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee Southwest Airlines 5 Contribution / Expenditure reported on: Schedule A2 Schedule A2 Schedule B Schedule F2 Schedule F4 Schedule F4 Schedule G Schedule F2 Schedule F4 Schedule F4 Schedule G Schedule F2 Schedule F4 Schedule F4 Schedule G Schedule G Schedul
Southwest Airlines 5 Contribution / Expenditure reported on: Schedule A2 Schedule B Schedule A2 Schedule B Schedule F2 Schedule F4 Schedule F2 Schedule F4 Schedule F2 Schedule F4 Schedule G Schedule H Schedule F2 Schedule F4 Schedule G Schedule H Schedule COH-UC X Schedule F2 Schedule G Schedule F3 Schedule G Schedule F4 Schedule G Schedule F4 Schedule G Schedule F4 Schedule G Schedule F5 Schedule COH-UC Isaac, Carrie Isaac, Carrie Schedule F4 Schedule Iccation O7/23/2024 Departure city or name of destination location O7/26/2024 Denver I0 Means of transportation I1 Purpose of travel (including name of conference, seminar, or other event)
5 Contribution / Expenditure reported on: Schedule A2 Schedule B Schedule A2 Schedule B Schedule F2 Schedule F4 Schedule G Schedule H Schedule COH-UC 6 Dates of Travel 7 Name of person(s) traveling Isaac, Carrie 8 Departure city or name of departure location Austin 9 Destination city or name of destination location Denver 10 Means of transportation
Schedule A2 Schedule B Schedule B(J) Schedule C2 Schedule D X Schedule F1 Schedule F2 Schedule F4 Schedule G Schedule H Schedule COH-UC 6 Dates of Travel 7 Name of person(s) traveling Isaac, Carrie 8 Departure city or name of departure location 07/23/2024 9 Destination city or name of destination location 07/26/2024 10 Means of transportation 11 Purpose of travel (including name of conference, seminar, or other event)
Schedule F2 Schedule F4 Schedule G Schedule H Schedule COH-UC 6 Dates of Travel 7 Name of person(s) traveling Isaac, Carrie Isaac, Carrie 07/23/2024 8 Departure city or name of departure location Austin Austin 9 Destination city or name of destination location Denver Denver 10 Means of transportation 11 9 Including name of conference, seminar, or other event)
6 Dates of Travel 7 Name of person(s) traveling Isaac, Carrie 07/23/2024 8 Departure city or name of departure location Austin 07/26/2024 9 Destination city or name of destination location Denver 10 Means of transportation 11 Purpose of travel (including name of conference, seminar, or other event) 11
07/23/2024 Isaac, Carrie 8 Departure city or name of departure location Austin Austin 9 Destination city or name of destination location 07/26/2024 Denver 10 Means of transportation 11 Purpose of travel (including name of conference, seminar, or other event)
07/23/2024 Isaac, Carrie 8 Departure city or name of departure location Austin Austin 9 Destination city or name of destination location 07/26/2024 Denver 10 Means of transportation 11 Purpose of travel (including name of conference, seminar, or other event)
07/23/2024 8 Departure city or name of departure location Austin 9 Destination city or name of destination location Denver 10 Means of transportation 11 Purpose of travel (including name of conference, seminar, or other event)
07/23/2024 Austin 9 Destination city or name of destination location 07/26/2024 Denver 10 Means of transportation 11 Purpose of travel (including name of conference, seminar, or other event)
9 Destination city or name of destination location 07/26/2024 10 Means of transportation 11 Purpose of travel (including name of conference, seminar, or other event)
07/26/2024 Denver 10 Means of transportation 11 Purpose of travel (including name of conference, seminar, or other event)
10 Means of transportation 11 Purpose of travel (including name of conference, seminar, or other event)