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 Commis 00024376		2 Total pages file 3 ⁻	
3 CANDIDATE /	MS / MRS / MR FIRST		MI		ISE ONLY
OFFICEHOLDER NAME	The Honorable Carol			Date Received	
				ELECTRONICA	LLY FILED
				10/07/2024	
	NICKNAME LAST		SUFFIX	10/01/2024	
	Alvara	200			
4 CANDIDATE /	ADDRESS / PO BOX; APT / SUITE	#; CITY;	ZIP CODE	Date Hand-delivered or	Date Postmarked
OFFICEHOLDER	P.O. Box 230842				
MAILING ADDRESS				Receipt #	Amount
	Lieusten TV 77000				
Change of Address	Houston, TX 77223			Date Processed	•
				Date Imaged	
5 CAMPAIGN	MS/MRS/MR FIRST		MI		
TREASURER	Ms. Yoland	da			
NAME					
			CULTIV		
	NICKNAME LAST	do	SUFFIX		
	Alvara	luo			
6 CAMPAIGN	STREET ADDRESS (NO PO BOX PL	_EASE); AP1	/ SUITE #; CITY;	STA	TE; ZIP CODE
TREASURER ADDRESS	6669 Fairfield				
(Residence or Business)	Houston, TX 77023				
7 CAMPAIGN	AREA CODE PHONE NUM	BER EXTENSION			
TREASURER PHONE	(713) 557-1767				
PHONE					
8 REPORT					
TYPE	January 15 X 30th	day before election	Runoff	15th day after can	
				appointment (offic	
	July 15 8th d	lay before election	Exceeded modified reporting limit	Final Report (Atta	ch C/OH-FR)
9 PERIOD	Month Day Year		Month Day	Year	
COVERED	07/01/2024	THROUGH	09/26/2024	1	
10 ELECTION	ELECTION DATE		ELECTION TYPE		
	Month Day Year	Primary	Runoff	Other	
	11/05/2024	X General	Special	_	
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT		
	State Senator District 6		State Senator Dis	strict 6	
	•				
		GO TO PAGE 2			
Forms provided by Te	exas Ethics Commission	www.ethics.state.tx.us	S	Versio	on V4.1.0.48da51f7

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2 2 of 37

13 C / OH NAME	Alvarado, Carol (The	Honorable)	14 Filer ID 00024376	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendit These expenditures may have been made without d officeholders are required to report this informatic	the candidate's or office	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS	
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	S)	\$ 112,953.16
EXPENDITURE TOTALS		\$ 0.00		
	4. TOTAL POLITIC	CAL EXPENDITURES		\$ 31,859.65
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE I RIOD	AST DAY OF THE	\$ 1,215,625.85
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	S OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT				
		I swear, or affirm, under penal true and correct and includes under Title 15, Election Code.		
		The Hor	orable Carol Alvarad	0
		Signature o	f Candidate or Officeho	lder
AFFIX NC)TARY STAMP / SEAL AB	OVE		
Sworn to and subs	cribed before me, by the s	aid	, this the	day
of	, 20, to c	ertify which, witness my hand and seal of office.		
Signature of offi	cer administering	Printed name of officer administering	Title of office	r administering oath
Forms provided by Te	exas Ethics Commissior	www.ethics.state.tx.us		Version V4.1.0.48da51f7

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 37 19 Filer ID 18 FILER NAME (Ethics Commission Filers) Alvarado, Carol (The Honorable) 00024376 **20** SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS 1. \$ 112,650.66 2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS 302.50 \$ SCHEDULE B: PLEDGED CONTRIBUTIONS \$ З. 4. SCHEDULE E: LOANS \$ 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 31,859.65 \$ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. \$ 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 8. \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS 9. \$ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 11. \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. X \$ 7,531.05 TO FILER

	The Instru	ction Guide explains how to complete	this for	rm.	1	Total pages Schedule A1: Sch: 1/14 Rpt: 4/37	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
	Alvarado, Ca	arol (The Honorable)				00024376	-
4	Date	5 Full name of contributor out-of-state PA	AC (ID#:)	7	Amount of Contribution (\$)	
	09/23/2024	ACT for Texas Classroom Teachers Association					\$2,000.00
	I	6 Contributor address; City; State; Zip Code					
		1					
		1					
		Austin, TX 78767					
8	Principal occu	ipation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PA	AC (ID#:)	Γ	Amount of Contribution (\$)	
	09/09/2024	Apache Corporation PAC					\$1,500.00
	I	Contributor address; City; State; Zip Code					
		1					
		1					
		Houston, TX 77056					
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions	;)		
	Date	Full name of contributor out-of-state PA	AC (ID#:)		Amount of Contribution (\$)	
	09/23/2024	Aransas-Corpus Christi Pilots PAC					\$1,000.00
		Contributor address; City; State; Zip Code					
		1					
		Corpus Christi, TX 78403					
	Princinal occu	upation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
					·)		
	Date	Full name of contributor out-of-state PA	AC (ID#:)	Γ	Amount of Contribution (\$)	
	09/10/2024	Atlas, Scott					\$250.00
	1	Contributor address; City; State; Zip Code					
		1					
		Louiston TX 77000					
<u> </u>	Principal occu	Houston, TX 77098 Ipation / Job title (See Instructions)		Employer (See Instructions	$\sum_{i=1}^{n}$		
	Legal Consu			Self	9		
╞	_				_	Amount of Contribution (¢)	
	Date 09/23/2024	Full name of contributor out-of-state PA Beer Alliance of Texas PAC	AC (ID#:)		Amount of Contribution (\$)	\$2,500.00
	0312312024						φ2,300.00
		Contributor address; City; State; Zip Code					
		1					
		Austin, TX 78701					
	Principal occu	Ipation / Job title (See Instructions)		Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		

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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 2/14 Rpt: 5/37	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
-		arol (The Honorable)			00024376	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/25/2024	Bell, Emerson				\$100.00
	I	6 Contributor address; City; State; Zip Code		1		
		Arlington, TX 76011-2243				
8			9 Employer (See Instructions			
	Investment N	Manager	Fee ONLY Financial Pla	ınn	ing	
_	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/23/2024	Blackridge				\$5,000.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78701				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)		
		1				
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/25/2024	Booth, Barbara				\$50.00
	I			ł		
		Guilford, CT 06437				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired	1	Retired			
	Date	Full name of contributor X out-of-state PAC (ID#: C	200085316)	Γ	Amount of Contribution (\$)	
	09/23/2024	Cigna Corp Employee PAC				\$1,000.00
	I			ł		
		Philadelphia, PA 19192				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
		1				
⊨	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/23/2024	Covestro PAC				\$1,000.00
		Contributor address; City; State; Zip Code		1		• •
		Pittsburgh, PA 15205				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	上 5)		
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The Instruc	ction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: Sch: 3/14 Rpt: 6/37	
2 FILER NAME			3 Filer ID (Ethics Commission	on Filers)
	arol (The Honorable)		00024376	, ,
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
09/12/2024	Dang, Kimberly			\$500.00
	6 Contributor address; City; State; Zip Code			
	Houston, TX 77024			
8 Principal occu CEO	pation / Job title (See Instructions)	9 Employer (See Instructions Kinder Morgan Inc.	3)	
Date)	Amount of Contribution (\$)	±1 000 00
09/23/2024				\$1,000.00
	Contributor address; City; State; Zip Code			
	Austin, TX 78701			
Princinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u></u>	
President		Danielle Delgadillo Cons		
Date	Full name of contributor Out-of-state PAC (ID#:		Amount of Contribution (\$)	
09/24/2024	Full name of contributor out-of-state PAC (ID#:_ Dow Inc. PAC	/		\$2,000.00
0312-11202-1				Ψ2,000.00
	Contributor address; City; State; Zip Code			
	Midland, MI 48674			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)	
Date	Full name of contributor X out-of-state PAC (ID#:	C00082792)	Amount of Contribution (\$)	
09/23/2024	Eli Lilly & Company PAC			\$1,500.00
	Contributor address; City; State; Zip Code			
	Indianapolis, IN 46285			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	3)	
Date	Full name of contributor X out-of-state PAC (ID#:	<u>C00340455</u>)	Amount of Contribution (\$)	
09/23/2024	Essential Utilities, Inc. PAC			\$2,000.00
	Contributor address; City; State; Zip Code			
	Bryn Mawr, PA 19010			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
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The Instruction Gu	uide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 4/14 Rpt: 7/37	
2 FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
Alvarado, Carol (The I	Honorable)				00024376	,
4 Date 5 Full na	ame of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
09/24/2024 Friend	ds of Baylor Med					\$2,500.00
6 Contril	ibutor address; City; Sta	ate; Zip Code				
Houst	ston, TX 77010					
8 Principal occupation / Jol	b title (See Instructions)		9 Employer (See Instruction	ıs)		
Date Full na	ame of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)	
09/13/2024 Garcia	ia, Roland					\$1,000.00
Contril	ibutor address; City; Sta			"		
	ston, TX 77042					
Principal occupation / Jo	b title (See Instructions)		Employer (See Instruction			
Attorney			Greenberg Traurig LLP)		
Date Full na	ame of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
09/26/2024 Gonza	zalez, Edward					\$5,000.00
Contril	ibutor address; City; Sta					
	ston, TX 77009		Encloser (Occolesteretion			
Principal occupation / Jol President	in the (See Instructions)		Employer (See Instruction Gonzalez & Associates		x.	
	ame of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	* ~ ~~~ ~~
	nberg Traurig, P.A. P.					\$2,000.00
Contril	ibutor address; City; Sta	ate; Zip Code				
Alban	ny, NY 12207					
Principal occupation / Jo	-		Employer (See Instruction	<u> </u> (21		
				.0)		
Date Full na	ame of contributor	out-of-state PAC (ID#:)	Т	Amount of Contribution (\$)	
09/23/2024 HOSF	PAC - State				()	\$3,000.00
Contril	ibutor address; City; Sta	ate; Zip Code				
Austir	n, TX 78701					
Principal occupation / Jo	b title (See Instructions)		Employer (See Instruction	ıs)		
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2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
		rol (The Honorable)			Č	00024376	
4	Date	5 Full name of contributor out-of-state PAC	C (ID#:_)	7	Amount of Contribution (\$)	
	09/23/2024	HS Law PAC					\$1,000.00
		6 Contributor address; City; State; Zip Code					
		Austin, TX 78701					
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions)		
					,		
	Date	Full name of contributor out-of-state PAG	C (ID#:)		Amount of Contribution (\$)	
	09/04/2024	Hendricks, John					\$50.00
		Contributor address; City; State; Zip Code					
		Plano, TX 75074					
		pation / Job title (See Instructions)		Employer (See Instructions)		
	Retired			Retired			
	Date	Full name of contributor out-of-state PAC	C (ID#:_)		Amount of Contribution (\$)	
	09/23/2024	Hillco Pac					\$1,000.00
	Contributor address; City; State; Zip Code						
		Aug-Min TV 70701					
	Deinsinglasse	Austin, TX 78701		Frankriger (Or a hardworther			
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date	Full name of contributor out-of-state PAC	C (ID#:)		Amount of Contribution (\$)	
	09/23/2024	Houston Pilots PAC					\$2,500.00
		Contributor address; City; State; Zip Code					
		Deer Park, TX 77536					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date	Full name of contributor out-of-state PAC	C (ID#:)		Amount of Contribution (\$)	¢1 000 00
	09/23/2024	IATSE Local 484 PAC Fund					\$1,000.00
		Contributor address; City; State; Zip Code					
		Austin, TX 78741					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
					/		

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 6/14 Rpt: 9/37 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Alvarado, Carol (The Honorable) 00024376 Date 4 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 09/23/2024 Independent Bankers Association of Texas PAC \$1,000.00 6 Contributor address; City; State; Zip Code Austin, TX 78701 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 09/25/2024 \$100.00 Kelly, Billy Contributor address; City; State; Zip Code South Houston, TX 77587 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) Date 09/23/2024 Law Offices of A. Craig Eiland P.C. \$350.00 Contributor address; City; State; Zip Code Austin, TX 78701 Principal occupation / Job title (See Instructions) Employer (See Instructions) X out-of-state PAC (ID#: C00097485 Date Full name of contributor Amount of Contribution (\$) 09/20/2024 \$2,000.00 Merck Employee PAC Contributor address; City; State; Zip Code Washington, DC 20004 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: \$1,000.00 09/25/2024 Miller, Robert Contributor address; City; State; Zip Code Dallas, TX 75201 Principal occupation / Job title (See Instructions) Employer (See Instructions) Attorney Locke Lord LLP

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	The Instru	ction Guide explains how to	o complete this fo	orm.	1	Total pages Schedule A1: Sch: 7/14 Rpt: 10/37	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
-		arol (The Honorable)				00024376	, in inc. e,
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/15/2024	Mindiola, Cindy					\$500.00
		6 Contributor address; City; State;	e; Zip Code				
		Louiston TV 77004					
Ļ	Dringing occu	Houston, TX 77004		Employer (See Instructions			
ð	Not Employe	Ipation / Job title (See Instructions)		9 Employer (See Instructions Not Employed	9		
					—		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	*1 000 00
	09/23/2024	Moak Casey PAC					\$1,000.00
		Contributor address; City; State;	;; Zip Code				
		Austin, TX 78746					
-	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	L;)		
					,		
╞	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/23/2024	Montford, John] out of other in the company			· · · · · · · · · · · · · · · · · · ·	\$2,500.00
		Contributor address; City; State;	e: Zip Code				
			, I				
L		San Antonio, TX 78257					
		pation / Job title (See Instructions)		Employer (See Instructions	;)		
	President			JTM Consulting, LLC	_		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/24/2024	NRG Energy PAC					\$2,000.00
		Contributor address; City; State;	; Zip Code				
		Princeton, NJ 08540-6213					
┝	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>لــــــــــــــــــــــــــــــــــــ</u>		
	Manager	panon, ooo aao (ooo		NRG	''		
╞	Date	Full name of contributor	out-of-state PAC (ID#:		_	Amount of Contribution (\$)	
	09/12/2024	Niemeier, Karen S	טעויטויסגמופ דאס נושיי	/		Allount of Contribution (*)	\$100.00
		Contributor address; City; State;	· 7in Code				+=
			, Zip 0000				
		Valley Glen, CA 91401					
	Principal occu	ipation / Job title (See Instructions)		Employer (See Instructions	;)		
	Research Ac	Iministrator		Children's Hospital Los	An	geles	

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The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 8/14 Rpt: 11/37	
2 FILER NAME			3 Filer ID (Ethics Commission	on Filers)
	arol (The Honorable)		00024376	лт не.е,
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
09/23/2024	PAC of The Independent Insurance Agents of T			\$2,500.00
	6 Contributor address; City; State; Zip Code			
	Austin, TX 78701		<u> </u>	
	upation / Job title (See Instructions)	9 Employer (See Instructions		
Governemer	ntal Affairs	Independent Insurance	Agents of Texas	
Date	—)	Amount of Contribution (\$)	
09/24/2024	Phillips 66 PAC			\$1,500.66
	Contributor address; City; State; Zip Code]		ļ
				ļ
	Washington, DC 20004		-	
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	
09/24/2024	Pipefitters' Local Union No. 211 COPE Account			\$2,000.00
	Contributor address; City; State; Zip Code			
	Deer Park, TX 77536			
Princinal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u></u>	
1 1110104. 0022)	
Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Amount of Contribution (\$)	
09/24/2024	Plains All American PAC	,		\$2,000.00
	Contributor address; City; State; Zip Code			·
	Houston, TX 77002			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	(ز	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/23/2024	Poinsett PLLC			\$1,000.00
	Contributor address; City; State; Zip Code			
	Austin, TX 78701			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<i></i>	

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 9/14 Rpt: 12/37	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
Ĺ		arol (The Honorable)			00024376	51111013)
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/23/2024	Riceland Consulting LLC				\$500.00
		6 Contributor address; City; State; Zip Code		1		
		Austin, TX 78701				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/23/2024	Ron Lewis and Associates Political Fund				\$500.00
		Contributor address; City; State; Zip Code		1		
		Contributor address, City, State, Zip Code				
		Austin, TX 78701				
⊢	Princinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u>		
	i incipal occu)		
⊢	Date	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	
	09/23/2024)		Amount of Contribution (\$)	\$500.00
	09/23/2024	Saenz, Cindy				Φ00.00
		Contributor address; City; State; Zip Code				
		Austin TV 70720				
	<u> </u>	Austin, TX 78739		Ĺ		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired		Retired			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/25/2024	Schlosser, John				\$1,000.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77024				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	President		Kinder Morgan Terminal	ls		
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/23/2024	Southern Glazer's PAC of Texas				\$1,000.00
		Contributor address; City; State; Zip Code		ł		
		Austin, TX 78701				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	1 5)		
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	The Instru	ction Guide explains how to	complete this fc	orm.	1	Total pages Schedule A1: Sch: 10/14 Rpt: 13/37	
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)
		arol (The Honorable)			-	00024376	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/26/2024	Spanjian, Laura					\$1,000.00
		6 Contributor address; City; State;	; Zip Code				
	ļ						
Ļ	D 1 - 1 - 1 - 0 - 0 - 0	Houston, TX 77005	T		Ĺ		
8		pation / Job title (See Instructions)	,	9 Employer (See Instructions) Airbnb)		
	Global Policy				_		
	Date		out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/23/2024	Sundt Texas PAC					\$2,000.00
		Contributor address; City; State;	Zip Code				
	ļ						
	ļ	Tempe, AZ 85282					
-	Principal occu	pation / Job title (See Instructions)	T	Employer (See Instructions	<u>ר</u>		
	T Thiopar ooca)		
╞	Date	Full name of contributor	out-of-state PAC (ID#:)	—	Amount of Contribution (\$)	
	09/24/2024	TREPAC, Texas Association)			\$5,000.00
	00/24/202 .	Contributor address; City; State;					ψ0,000.00
		Contributor address, City, State,					
		Austin, TX 78768					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/24/2024	TX Independent Auto Dealers					\$1,500.00
		Contributor address; City; State;					
	ļ						
	Drive in all a servi	Austin, TX 78750	T		Ĺ		
		pation / Job title (See Instructions)		Employer (See Instructions		abile Acception	
	Director			Texas Independent Auto			
	Date		out-of-state PAC (ID#:)		Amount of Contribution (\$)	*10 000 00
	08/07/2024	Teague, Jim					\$10,000.00
		Contributor address; City; State;	Zip Code				
	ļ						
	1	Houston, TX 77024					
┝	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	CEO	,		Enterprise Products	,		
┝			L				

				_		
The Instruc	ction Guide explains how	<i>i</i> to complete this f	orm.	1	Total pages Schedule A1: Sch: 11/14 Rpt: 14/37	
2 FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
Alvarado, Ca	rol (The Honorable)				00024376	
4 Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
09/23/2024	Texans for Lawsuit Reform					\$2,500.00
ľ	6 Contributor address; City; St	tate; Zip Code				
	Austin, TX 78701					
8 Principal occup	pation / Job title (See Instructions	s)	9 Employer (See Instructions)	;)		
Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
09/23/2024	Texas Association of Crar					\$1,000.00
ľ	Contributor address; City; St					
	Austin TV 70716					
Dringinal occur	Austin, TX 78716 pation / Job title (See Instructions		Employer (See Instructions			
Pillicipai occup	אווטוו / גווע נווע (אווט וווטע נווט אווטעניטייש)	·)	Employer (See Instructions)	5)		
Data	Full name of contributor		<u> </u>		Amount of Contribution (\$)	
Date 09/23/2024	Full name of contributor Texas Automobile Dealers	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$5,000.00
03/23/2024						Φ0,000.00
	Contributor address; City; St	ate; Zip Coue				
	Austin, TX 78701					
Principal occup	pation / Job title (See Instructions	3)	Employer (See Instructions)	5)		
Date	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
08/05/2024	Texas Democratic Womer	n				\$100.00
ľ	Contributor address; City; St	tate; Zip Code		1		
	Auto TV 70700					
Dringingl occur	Austin, TX 78703		Employer (Soo Instructions			
Επιτισμαί στουμ	pation / Job title (See Instructions	·)	Employer (See Instructions)	5)		
Date	Full name of contributor		<u> </u>		Amount of Contribution (\$)	
09/23/2024	Texas Energy PAC	out-of-state PAC (ID#:	/			\$500.00
, , , , , , , , , , , , , , , , , , , ,	Contributor address; City; St	tate: 7in Code		$\left \right $		Ψυυυ.υ.ς
	Austin, TX 78701					
Principal occup	pation / Job title (See Instructions	(ذ	Employer (See Instructions)	;)		
		,				
			•			

	The Instru	ction Guide explains how to complete this fo	1	Total pages Schedule A1: Sch: 12/14 Rpt: 15/37		
2	FILER NAME		3	Filer ID (Ethics Commissio	n Filers)	
ľ		arol (The Honorable)		5	00024376	JIT IICI3)
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	08/07/2024	Texas Impact, a CRH PAC				\$1,500.00
		6 Contributor address; City; State; Zip Code				
		Austin, TX 78726				
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 (\$)	
	09/23/2024	Texas Lobby Partners LLP				\$2,000.00
		Contributor address, City, State, Zip Code				
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
				,		
	Date	Full name of contributor Out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/25/2024	Texas Optometric PAC	/			\$1,000.00
		Contributor address; City; State; Zip Code				+_,
		Austin, TX 78705				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	07/06/2024	Texas Society of CPAs PAC				\$2,000.00
		Contributor address; City; State; Zip Code				
		Dallas, TX 75254				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/24/2024	Texas State Teachers Association PAC				\$2,000.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
1						

	The Instru	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 13/14 Rpt: 16/37		
2	FILER NAME		3	Filer ID (Ethics Commissio	on Filers)	
		arol (The Honorable)			00024376	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/24/2024	Texas Trial Lawyers Association PAC				\$5,000.00
	I	6 Contributor address; City; State; Zip Code		1		
	I					
	I					
		Austin, TX 78701				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions			
	Director		Texas Trial Lawyers Ass	500	siation	
╞	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/24/2024	The American Electric Power Company - Texas				\$1,000.00
	l	Contributor address; City; State; Zip Code		ł		
	I					
	I					
	I	Washington, DC 20004				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
╞	Date	Full name of contributor X out-of-state PAC (ID#:_	C00101766)	Γ	Amount of Contribution (\$)	
	09/10/2024	United Airlines PAC				\$2,000.00
		Contributor address; City; State; Zip Code		ł		·
	l					
	l					
	I	Chicago, IL 60622				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>لــــــــــــــــــــــــــــــــــــ</u>		
	-	· · · ·				
╞	Date	Full name of contributor out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	09/23/2024	Valdez, Jerry				\$1,000.00
	00,20,212	Contributor address; City; State; Zip Code		ł		+_,
	l	Contributor address, City, State, Zip Code				
	I					
	I	Austin, TX 78711				
\vdash	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	<u>لــــــــــــــــــــــــــــــــــــ</u>		
	Consultant		Self	,		
⊨	Date	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	
	09/23/2024	Veterinarian PAC	/			\$500.00
	0312012027				ψυυυ.υυ	
	l	Contributor address; City; State; Zip Code				
	I					
	I	Austin, TX 78754				
⊢	Princinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ل</u> ے		
	Director		Texas Veterinary Medica		Association	
┝						

	The Instru	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 14/14 Rpt: 17/37		
2	FILER NAME		3	Filer ID (Ethics Commissio	n Filers)	
	Alvarado, Ca	arol (The Honorable)			00024376	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
ľ	09/09/2024	White, Stevan)	ľ		\$50.00
	03/03/2024					φ30.00
		6 Contributor address; City; State; Zip Code				
		San Angelo, TX 76903-8643				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Retired		Retired			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/23/2024	Wholesale Beer Distributors of Texas PAC				\$1,500.00
		Contributor address; City; State; Zip Code		·		
		Austin, TX 78701				
⊢	Dringing ogg	pation / Job title (See Instructions)	Employer (See Instructions			
	Vice Preside		Wholesale Beer Distribu	,	e of Toylog	
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/27/2024	Zarrabi, Saam				\$1,000.00
		Contributor address; City; State; Zip Code		"		
		Irving, TX 75038				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Dentist		Rodeo Dental			
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NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

	The Instruction Guide explains how to complete	1	1 Total pages Schedule A2: Sch: 1/1 Rpt: 18/37				
2	FILER NAME		3	Filer ID (Ethics	s Commission Filers)		
	Alvarado, Carol (The Honorable)				00024376		
4	TOTAL OF UNITEMIZED IN-KIND POLITICAL CO	ITRIBUTIONS		\$			
5	Date 6 Full name of contributor out-of-state PAC 09/23/2024 Moak Casey PAC 7 Contributor address; City; State; Zip Code	8	contribution (\$) \$302.50	 9 In-kind contribution description Fundraiser Food and Beverage, Venue Rental 			
	Austin, TX 78746				Check if travel o	utside of Texas. Complete Schedule T.	
10	Principal occupation / Job title (FOR NON-JUDICIAL) (See instru	ctions) 11 Employ	/er (FOR NON	-JU	JDICIAL) (See in	istructions)	
12	2 Contributor's principal occupation (FOR JUDICIAL)	13 Contrib	13 Contributor's job title (FOR JUDICIAL) (See instructions)				
14	Contributor's employer/law firm (FOR JUDICIAL)	15 Law fin	m of contributo	or's	spouse (if any) (F	FOR JUDICIAL)	
16	If contributor is a child, law firm of parent(s) (if any) (FOR JUDIC	AL)					

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B 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 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			•	3	Filer ID (Ethics Commission Filers)
-	Sch: 1/17 Rpt: 19/37		Alvarado, Carol (The Honorable)			5	00024376
4	Date	5	Payee name				
	09/10/2024		4Imprint				
6	Amount (\$)	7	Payee address; City; State	; Zip Co	de		
	\$732.13		P.O. Box 320				
			Oshkosh, WI 54901				
8	PURPOSE	(a)	Category (See Categories listed at the top of this sch	nedule)	(b) Description		
	OF EXPENDITURE		Printing Expense	iouulo)		outsi	de of Texas. Complete Schedule T.
	EXPENDITORE						officeholder living expense
					Plastic bags t	or	Senior Event
_							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ght		Office held
	Date		Payee name				
	07/05/2024		AT&T				
	Amount (\$)		Payee address; City; State	; Zip Co	de		
	\$85.97 P.O. Box 930170						
			Dallas, TX 75393				
	PURPOSE OF		Category (See Categories listed at the top of this sch	nedule)	(b) Description		
	EXPENDITURE		Office Overhead/Rental Expense				de of Texas. Complete Schedule T. , officeholder living expense
							communications, Cell Phone
	Complete ONLY if direct	C	andidate/Officeholder name	Office sou	ght		Office held
	expenditure to benefit C/OI	Н					
	Date		Payee name				
	08/06/2024		AT&T				
-	Amount (\$)		Payee address; City; State	; Zip Co	de		
	\$173.36		P.O. Box 930170	· •			
			Dallas, TX 75393				
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	nedule)	(b) Description		
	OF EXPENDITURE		Office Overhead/Rental Expense				de of Texas. Complete Schedule T.
							officeholder living expense
					Campaign 16	net.	
-	Complete ONLY if direct		andidate/Officeholder name	Office sou	aht		Office held
	expenditure to benefit C/OI			51100 30U	Aur		

	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/Reimbursemer Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)				
	Sch: 2/17 Rpt: 20/37	Alvarado, Carol (The Honorable)	00024376				
4	Date	Payee name					
	09/04/2024	AT&T					
6	Amount (\$)	Payee address; City; State; Zip Code					
	\$86.00	P.O. Box 930170					
		Dallas, TX 75393					
8	PURPOSE	Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Office Overhead/Rental Expense	vel outside of Texas. Complete Schedule T.				
	EXPENDITORE		stin, TX, officeholder living expense				
		Campaign	Telecommunications, Cell Phone				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	09/26/2024	ActBlue					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$521.42 PO Box 441146						
		Somerville, MA 02144					
	PURPOSE OF EXPENDITURE	Check if Au	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense				
		Credit Car	d Processing Fees 7/01 - 09/26/2024				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	08/09/2024	Allegro Royal Sonesta Hotel					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$1,498.04	171 W. Randolph St.					
		Chicago, IL 60601					
	PURPOSE	Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE		vel outside of Texas. Complete Schedule T.				
			stin, TX, officeholder living expense				
			om August 19-23, 2024 to attend c National Convention				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				

		EXPENDITURE CA	TEGORIES FOR	3OX 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 Expens ittee Legal Services The Instruction Guide ex	Office Overh Polling Expe Se Printing Exp Salaries/Wa	ense jes/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:			3	Filer ID (Ethics Commission Filers)
	Sch: 3/17 Rpt: 21/37	Ivarado, Carol (The Honorable)	1		00024376
4	Date 07/12/2024	ayee name Blackburn, Benjamin			
6	Amount (\$) \$2,300.00	ayee address; City; 05 W. 14th Street Austin, TX 78701	State; Zip Code	3	
8	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top o Office Overhead/Rental Expense		X Check if Austin, T	side of Texas. Complete Schedule T. X, officeholder living expense Apartment for Legislative Purposes
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	ndidate/Officeholder name	Office sough	nt	Office held
	Date	ayee name			
	08/12/2024	Blackburn, Benjamin			
	Amount (\$) \$2,300.00	ayee address; City; 05 W. 14th Street austin, TX 78701	State; Zip Code	2	
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top o Office Overhead/Rental Expense		X Check if Austin, T	side of Texas. Complete Schedule T. X, officeholder living expense Apartment for Legislative Purposes
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	ndidate/Officeholder name	Office sough	t	Office held
	Date	ayee name			
	09/12/2024	Blackburn, Benjamin			
	Amount (\$) \$2,300.00	ayee address; City; 05 W. 14th Street	State; Zip Code	2	
		ustin, TX 78701			
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top o Office Overhead/Rental Expense		X Check if Austin, T	side of Texas. Complete Schedule T. X, officeholder living expense Apartment for Legislative Purposes
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	ndidate/Officeholder name	Office sough	it	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/Reinbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)						
	Sch: 4/17 Rpt: 22/37	Alvarado, Carol (The Honorable) 00024376							
4	Date 09/10/2024	5 Payee name CVS							
6	Amount (\$) 7 Payee address; City; State; Zip Code \$41.99 \$4516 Harrisburg Blvd. Houston, TX 77011								
8	 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense SD Card for photos at Senior Fall Event 								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	07/05/2024	City of Baytown							
	Amount (\$) Payee address; City; State; Zip Code \$500.00 2401 Market St. Baytown, TX 77520								
	PURPOSE OF EXPENDITURE	Candidate/Officeholder/Political Committee	utside of Texas. Complete Schedule T. TX, officeholder living expense of Back to School Fair						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	07/02/2024	Constant Contact							
	Amount (\$) \$154.57	Payee address;City;State;Zip Code1601 Trapelo Rd.							
		Waltham, MA 02451							
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense or Campaign List Management						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	3 Filer ID (Ethics Commission Filers)						
-	Sch: 5/17 Rpt: 23/37	Alvarado, Carol (The Honorable)	00024376					
4	Date 08/01/2024	Payee name Constant Contact						
6	Amount (\$) \$154.57							
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Subscription for Campaign List Management								
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	Constant Contact						
	Amount (\$) Payee address; City; State; Zip Code \$154.57 1601 Trapelo Rd.							
		Waltham, MA 02451						
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense for Campaign List Management					
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	09/11/2024	Greater Houston LULAC 4967						
	Amount (\$) \$350.00	Payee address;City;State; Zip CodeP.O. Box 1012						
		Houston, TX 77251						
	PURPOSE OF EXPENDITURE	Check if Austin,	outside of Texas. Complete Schedule T. TX, officeholder living expense pendence Day Parade Fee					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		hittee Gift/Awards	rage Expense s/Memorials Expense	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 [2	Filer ID (Ethics Commission Filers)	
1	Sch: 6/17 Rpt: 24/37		Ivarado, Carol (Th	e Honorable)	00024376				
4	Date 07/11/2024		5 Payee name HEB						
6 Amount (\$) \$4.07 7 Payee address; City; State; Zip Code \$4.07 3111 Woodridge Houston, TX 77087									
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Ice for constituent					, officeholder living expense				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder	name C	Office soug	ht		Office held	
	Date	Р	ayee name						
08/15/2024 Harris County Democratic Party									
Amount (\$) Payee address; City; State; Zip Code \$4,500.00 4619 Lyons Ave. Houston, TX 77020									
	PURPOSE OF EXPENDITURE	(a) C C	category _{(See Categorie} Contributions/Dona	es listed at the top of this sche		Check if Austin	, TX,	ide of Texas. Complete Schedule T. , officeholder living expense d table purchase for JJR Dinner	
	Complete ONLY if direct expenditure to benefit C/OF		ndidate/Officeholder	name C	Office soug	ht		Office held	
	Date	Р	ayee name						
	09/26/2024		larris County Tejar	no Democrats					
	Amount (\$) \$300.00		ayee address; C 213 Houston Ave.		Zip Coc	e			
		Н	louston, TX 77009	-5427					
	PURPOSE OF EXPENDITURE		ategory _{(See Categorie} dvertising Expens	es listed at the top of this sche	edule)	Check if Austin	, TX,	ide of Texas. Complete Schedule T. , officeholder living expense Roast and Toast Dinner program	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder	name C	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	/ - al Corr	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide expla	Office Ov Polling E Printing I Salaries/	verhea xpens Expens Wages	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 File	ers)
	Sch: 7/17 Rpt: 25/37		Alvarado, Carol (The Honorable)					00024376	
4	Date	5	Payee name						
	07/02/2024		Hill Country Springs						
6	Amount (\$)	7	Payee address; City; St	ate; Zip C	ode				
	\$24.32		P.O. Box 2220						
			Manchaca, TX 78652-2220						
8	PURPOSE	<u> </u>			(h)	Description			
ľ	OF		Category (See Categories listed at the top of this Office Overhead/Rental Expense	s schedule)	(0)		outsi	ide of Texas. Complete Schedule T.	
	EXPENDITURE							, officeholder living expense	
						Water for Sta	te (Capitol Office	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office so	ught			Office held	
	Date		Payee name						
	08/02/2024	I	Hill Country Springs						
	Amount (\$)	<u> </u>		ate; Zip C	ode				
	\$54.81	I	P.O. Box 2220	ale, zip c	oue				
	φ 04.0 1		F.O. B0X 2220						
			Manchaca, TX 78652-2220						
	PURPOSE OF	(a)	Category (See Categories listed at the top of this	s schedule)	(b)	Description			
	EXPENDITURE		Office Overhead/Rental Expense					ide of Texas. Complete Schedule T. , officeholder living expense	
								Capitol Office	
						Water for Sta		Capitor Onice	
	Complete ONLY if direct		andidate/Officeholder name	Office so				Office held	
	expenditure to benefit C/OI		andidate/Oncentitier name	Onice 30	uyin			Once neu	
	-								
	Date		Payee name						
	09/04/2024		Hill Country Springs						
	Amount (\$)			ate; Zip C	ode				
	\$10.83		P.O. Box 2220						
			Manchaca, TX 78652-2220						
	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description			
	OF EXPENDITURE		Office Overhead/Rental Expense	ŗ				ide of Texas. Complete Schedule T.	
	EXPENDITORE							, officeholder living expense	
						water for Sta	te (Capitol Office	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office so	ught			Office held	
	supervisitore to serient C/OI								

	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: 8/17 Rpt: 26/37	Alvarado, Carol (The Honorable) 00024376						
4	Date 07/18/2024	5 Payee name Hobby Lobby						
6	Amount (\$) \$54.11							
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Custom Framing for Constituent Gifts								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	07/29/2024	Hobby Lobby						
	Amount (\$) Payee address; City; State; Zip Code \$53.03 6145 Westheimer Road							
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense ing for Constituent Gifts					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	08/15/2024	Hobby Lobby						
	Amount (\$) \$45.45	Payee address; City; State; Zip Code 6145 Westheimer Road						
		Houston, TX 77057						
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense ing for Constituent Gifts					
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	2 FILER NAME 3	Filer ID (Ethics Commission Filers)						
-	Sch: 9/17 Rpt: 27/37	Alvarado, Carol (The Honorable)	00024376						
4	Date 08/26/2024	5 Payee name Hobby Lobby							
6	Amount (\$) \$34.09	7 Payee address; City; State; Zip Code 5651 Fairmont Parkway Pasadena, TX 77505							
8	8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Custom Framing for Constituent Gifts								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	09/23/2024	Houston East End Chamber of Commerce							
	Amount (\$) \$500.00	Payee address; City; State; Zip Code P.O. Box 15068							
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Fees (b) Description 									
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	07/23/2024	Houston Federation of Teachers							
	Amount (\$) \$250.00	Payee address; City; State; Zip Code 2704 Sutherland							
		Houston, TX 77023							
	PURPOSE OF EXPENDITURE	Candidate/Officeholder/Political Committee	side of Texas. Complete Schedule T. K, officeholder living expense Back to School Backpack Giveaway						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		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: 10/17 Rpt: 28/37	Alvarado, Carol (The Honorable)	00024376							
4	Date 07/14/2024	5 Payee name Houston LGBTQ+ Political Caucus								
_										
6	Amount (\$) \$40.00	7 Payee address; City; State; Zip Code P.O. Box 66664 Houston, TX 77266-6664								
	DUDDOCE									
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 2024 Annual Dues 								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	09/04/2024	J&N Enterprises								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$665.74	2519 Fairway Park Drive Houston, TX 77092								
	PURPOSE OF EXPENDITURE									
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held H								
	Date	Payee name								
	08/12/2024	Law Offices of Kevin C. Stewart								
	Amount (\$) \$1,250.00	Payee address; City; State; Zip Code 6801 Yaupon Drive								
		Austin, TX 78759								
	PURPOSE OF EXPENDITURE	Check if Austin,	utside of Texas. Complete Schedule T. TX, officeholder living expense mpliance Consulting							
	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	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)							
Ĺ	Sch: 11/17 Rpt: 29/37	Alvarado, Carol (The Honorable)	00024376							
4	Date 09/16/2024	Payee name Meyerland Area Democrats Club								
6	Amount (\$) \$250.00	Payee address; City; State; Zip Code P.O. Box 310061 Houston, TX 77035								
8	PURPOSE OF EXPENDITURE	OF Contributions/Donations Made By								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held							
	Date 08/30/2024	Payee name Morgan LaMantia for Senate Campaign								
	Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 1324 E. Madison Brownsville, TX 78520								
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Contribution										
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	07/03/2024	Party City								
	Amount (\$) \$71.99	Payee address; City; State; Zip Code 516 Gulfgate Center								
		Houston, TX 77087								
	PURPOSE OF EXPENDITURE		el outside of Texas. Complete Schedule T. in, TX, officeholder living expense ly decorations for parade							
	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	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gitt/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	2 FILER NAME	Filer ID (Ethics Commission Filers)							
-	Sch: 12/17 Rpt: 30/37	Alvarado, Carol (The Honorable)	00024376							
4	Date 08/08/2024	5 Payee name Safe Walk Home								
6	Amount (\$) \$200.00	 Payee address; City; State; Zip Code 5806 Verdone Houston, TX 77092 								
8	PURPOSE OF EXPENDITURE	OF Contributions/Donations Made By								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	07/23/2024	Sam Houston PTO								
	Amount (\$) \$250.00	Payee address; City; State; Zip Code 9400 Irvington Blvd.								
	DUDDOGE	Houston, TX 77076								
	PURPOSE OF EXPENDITURE	Candidate/Officeholder/Political Committee	tside of Texas. Complete Schedule T. X, officeholder living expense f Back to School Community Event							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	07/11/2024	Six Westheimer, LTD.								
	Amount (\$) \$10.00	Payee address; City; State; Zip Code 1520 Oliver Street								
		Houston, TX 77007								
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense ff							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)							
	Sch: 13/17 Rpt: 31/37	Alvarado, Carol (The Honorable)	00024376							
4	Date	Payee name								
	08/13/2024	South Belt Graphics and Printing								
6	Amount (\$)	Payee address; City; State; Zip Code								
	\$650.00	11555 Beamer								
		Houston, TX 77089-2398								
8	PURPOSE									
ľ	OF	Advertising Expense (See Categories listed at the top of this schedule)	outside of Texas. Complete Schedule T.							
	EXPENDITURE		, TX, officeholder living expense							
		Pasadena IS	D Football Program Ads							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	07/05/2024	Southwest Airlines								
-	Amount (\$)	Payee address; City; State; Zip Code								
	\$199.46	2702 Love Field Dr.								
	φ100.40									
		Dallas, TX 75235								
	PURPOSE OF	Category (See Categories listed at the top of this schedule) (b) Description								
	EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense							
			n Houston to Chicago							
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held							
	expenditure to benefit C/Oł									
F	Date	Payee name								
	07/05/2024	Texas Senate Democratic Caucus								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$5,000.00	P.O. Box 1042								
		Austin, TX 78767								
	PURPOSE	Category (See Categories listed at the top of this schedule) (b) Description								
	OF EXPENDITURE		outside of Texas. Complete Schedule T.							
			n, TX, officeholder living expense							
		2024 Annual	Dues							
_										
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic 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					2	Filer ID	(Ethics Commission Filers)		
1	Sch: 14/17 Rpt: 32/37	2	Alvarado, Carol (The Honoral	ole)			3	00024376			
4	Date	5	Payee name								
	09/13/2024		U.S.Postmaster								
6	Amount (\$)	7	Payee address; City;	State	; Zip Coo	le					
	\$170.00		5415 Lawndale St.								
			Houston, TX 77023								
8	PURPOSE				L						
°	OF	(a)	Category (See Categories listed at the	top of this sch	nedule)	(b) Description	outs	ide of Texas. Comp	lete Schedule T		
	EXPENDITURE		Fees					, officeholder living			
						Campaign P	O E	Box			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	C	Dffice soug	ht		Office he	ld		
	Date		Payee name								
	08/23/2024		Uber								
	Amount (\$)		Payee address; City;	State	; Zip Coo						
	\$264.08		1515 3rd St.	State,	, 20 000						
	φ204.00		1010 510 51.								
			San Francisco, CA 94158								
	PURPOSE	(a)	Category (See Categories listed at the	top of this sch	nedule)	(b) Description					
	OF EXPENDITURE		Travel Out of District					ide of Texas. Comp			
								, officeholder living			
								ug. 19 - 23, 2	National Convention in 024		
	-										
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Ĺ	Office soug	Int		Office he	la		
	Date		Payee name								
	07/05/2024		United Airliines								
	Amount (\$)		Payee address; City;	State;	; Zip Coo	le					
	\$222.12		233 S. Wacker Dr.								
			Chicago, IL 60606								
	PURPOSE	(a)	Category (See Categories listed at the	top of this sch	redule)	(b) Description					
	OF		Travel Out of District		,		outs	ide of Texas. Comp	lete Schedule T.		
	EXPENDITURE							, officeholder living			
						Air travel fror	n C	chicago to Ho	uston		
L											
	Complete ONLY if direct		Candidate/Officeholder name	(Office soug	ht		Office he	ld		
	expenditure to benefit C/OI	Н									

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Fees Office Overhead/Rental Expense Tr Food/Beverage Expense Polling Expense Tr By - Gift/Awards/Memorials Expense Printing Expense Tr					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: 15/17 Rpt: 33/37		Alvarado, Carol (The Honorable))				00024376		
4	Date	5	Payee name				I			
	08/23/2024		United Airliines							
6	Amount (\$)	7	Payee address; City;	State;	Zip Co	le				
	\$98.36		233 S. Wacker Dr.							
			Chicago, IL 60606							
8	PURPOSE	(a)	Category (See Categories listed at the top o	f this sche	edule)	(b) Description				
	OF		Fees		Julioy		outsi	ide of Texas. Complete Schedule T.		
	EXPENDITURE							, officeholder living expense		
						Change of Fl	igh	t Fee		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	O	office soug	ht		Office held		
_	Data	<u> </u>								
	Date		Payee name							
	07/05/2024		Vida City Church							
	Amount (\$)		Payee address; City;	State;	Zip Co	le				
	\$257.50		1300 West Mount Houston Rd.							
			Houston, TX 77038							
	PURPOSE OF	(a)	Category (See Categories listed at the top o	of this sche	edule)	(b) Description				
	EXPENDITURE		Contributions/Donations Made B		ittoo			ide of Texas. Complete Schedule T. , officeholder living expense		
		Candidate/Officeholder/Political Committee						Drive Sponsorship		
	Complete ONLY if direct		Candidate/Officeholder name	0	office soug	ht		Office held		
	expenditure to benefit C/OI	Н								
	Date	Γ	Payee name							
	07/22/2024		X Corp.							
	Amount (\$)		Payee address; City;	State;	Zip Co	le				
	\$8.64		1355 Market St., Ste. 900							
			San Francisco, CA 94103							
	PURPOSE	(a)	Category (See Categories listed at the top o	of this sche	edule)	(b) Description				
	OF EXPENDITURE		Fees					ide of Texas. Complete Schedule T.		
								, officeholder living expense		
						COH Verifica	uor			
		Ļ	Sondidate/Officeholder reme	~	ffice	ht		Office hold		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	0	office soug	III		Office held		
	-									

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	· · · · ·	B Filer ID (Ethics Commission Filers)							
-	Sch: 16/17 Rpt: 34/37	Alvarado, Carol (The Honorable)	00024376							
4	Date 08/22/2024	Payee nameX Corp.								
6	Amount (\$) \$8.64	7 Payee address; City; State; Zip Code 1355 Market St., Ste. 900 San Francisco, CA 94103								
8	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense COH Verification Fee									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	09/20/2024	X Corp.								
	Amount (\$) \$8.64	Payee address; City; State; Zip Code 1355 Market St., Ste. 900 San Francisco, CA 94103 San Francisco, CA 94103 San Francisco, CA 94103								
	PURPOSE OF EXPENDITURE	tside of Texas. Complete Schedule T. 'X, officeholder living expense ON Fee								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	07/05/2024	Zoom.us								
	Amount (\$) \$17.05	Payee address; City; State; Zip Code 55 Almaden Blvd., 6th Floor								
		San Jose, CA 95113								
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense pscription for Video Conferencing							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage E Gift/Awards/Mem nmittee Legal Services	Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gitf/Awards/Memorials Expense Printing Expense				Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)	
	Sch: 17/17 Rpt: 35/37		Alvarado, Carol (The Ho	onorable)				00024376		
4	Date	5	Payee name							
	08/05/2024		Zoom.us							
6	Amount (\$)	7	Payee address; City;	State;	Zip Coc	le				
	\$17.05		55 Almaden Blvd., 6th F	loor						
			San Jose, CA 95113							
8	PURPOSE	(a)	Category (See Categories liste	d at the top of this sche	edule)	b) Description				
	OF EXPENDITURE		Office Overhead/Rental				outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITORE							officeholder living		
						Campaign Si	lbs	cription for V	ideo Conferencing	
_										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder nam	e O	Office soug	ht		Office he	2ld	
	Date		Payee name							
	09/05/2024		Zoom.us							
	Amount (\$)		Payee address; City;	State;	Zip Coc	le				
	\$17.05		55 Almaden Blvd., 6th F	loor						
			San Jose, CA 95113							
	PURPOSE	(a)	Category (See Categories liste	d at the top of this sche	edule)	b) Description				
	OF EXPENDITURE		Office Overhead/Rental	Expense				de of Texas. Com		
	-					Check if Austin, TX, officeholder living expense Campaign Subscription for Video Conferencing				
						Campaign St	1D2		nueo comerencing	
	Complete ONLY if direct		Candidate/Officeholder nam	e 0)ffice soug	ht		Office he	ald.	
	expenditure to benefit C/Oł				mee soug			Office fre		

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

SCHEDULE K

	The Instru	ages Schedule K: I/1 Rpt: 36/37					
2	FILER NAME	D (Ethics Commiss	sion Filers)				
	Alvarado, Ca	1376					
4	Date	5		8 Amount (\$)			
	07/24/2024		Amegy Bank				\$930.81
		6	Address of person from whom amount is received; City; State; Zip Code				
			Houston, TX 77027				
		7	—	politi	cal cont	ribution returned to t	filer
			Monthly Interest from Money Market Account				
	Date	\Box	Name of person from whom amount is received			Amount (\$)	
	08/30/2024		Amegy Bank				\$621.49
			Address of person from whom amount is received; City; State; Zip Code				
			Lauran TV 77007				
		\vdash	Houston, TX 77027		l -ont		ei - "
			Purpose for which amount is received Check if p Interest from Money Market Account	JOIIU	cal com	ribution returned to f	filer
⊨		Ļ					
	Date		Name of person from whom amount is received			Amount (\$)	ቀጋ ባጋር 10
	09/12/2024		Amegy Bank				\$2,036.48
			Address of person from whom amount is received; City; State; Zip Code				
			Houston, TX 77027				
			Purpose for which amount is received Check if	politi	cal cont	ribution returned to t	filer
			Monthly Interest from Certificate of Deposit				
	Date	F	Name of person from whom amount is received			Amount (\$)	
	08/12/2024		Amegy Bank				\$2,007.26
			Address of person from whom amount is received; City; State; Zip Code				
		F	Houston, TX 77027		· .		
			Purpose for which amount is received Check if p Monthly Interest from Certificate of Deposit	JOIITI	cal cont	ribution returned to f	filer
⊨		Ļ					
	Date		Name of person from whom amount is received			Amount (\$)	ቀ1 025 01
	07/12/2024		Amegy Bank				\$1,935.01
			Address of person from whom amount is received; City; State; Zip Code				
			Houston, TX 77027				
		\vdash		politi	cal cont	I ribution returned to 1	filer
			Monthly Interest from Certificate of Deposit		000.2		
⊢		L	`				

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

SCHEDULE T

The Inst	ruction (Guide explains h	now to complete	this	form.		otal pages Schedule T ch: 1/1 Rpt: 37/37	:			
2 FILER NAME							3 Filer ID (Ethics Commission Filers)				
Alvarado, Carol (The Honorable)							0024376				
4 Name of Contribut	or / Corpor	ration or Labor Organ	ization / Pledgor /Paye	e							
Southwest Airlin	es										
5 Contribution / Expe	5 Contribution / Expenditure reported on:										
Schedule A2		Schedule B	Schedule B(J)	Г	Schedule C2	Schedule D X Schedule F1					
Schedule F2		Schedule F4	Schedule G	Ē	Schedule H		Schedule COH-UC				
6 Dates of Travel	7 Name	e of person(s) traveling]								
	Alvara	ado, Carol (Sen.)									
	8 Depar	rture city or name of d	eparture location								
08/19/2024	Houst	ton									
	9 Destin	nation city or name of	destination location								
08/19/2024	Chica	ago									
10 Means of transport	tation	11 Purpose of trave	el (including name of c	onfer	ence, seminar, or	other	event)				
Commercial Airp	olane	Air travel from	Houston to Chicago	o on	August 19, 202	4 to a	ttend Democratic Na	ational Convention			
Name of Contribut	or / Corpor	ration or Labor Organ	ization / Pledgor /Paye	e							
United Airliines											
Contribution / Expe	enditure re	ported 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				
Dates of Travel	Name	e of person(s) traveling)								
	Alvara	ado, Carol (Sen.)									
	Depar	rture city or name of d	eparture location								
08/23/2024	Chica	ago									
	Destin	nation city or name of	destination location								
08/23/2024	Houst	ton									
Means of transport	I tation	Purpose of trave	el (including name of c	onfer	ence, seminar, or	other	event)				
Commercial Airp	olane						r attending Democra	atic National			
· · · ·							0				