

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 Commission Filers) 00087851	2 Total pages filed: 93		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mrs.	FIRST Cecilia	MI MI	OFFICE USE ONLY Date Received ELECTRONICALLY FILED 10/07/2024	
	NICKNAME	LAST Castellano	SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 430 Savannah Heights Von Ormy, TX 78073		ZIP CODE	Date Hand-delivered or Date Postmarked	
				Receipt # Amount	
				Date Processed	
				Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mrs.	FIRST Cecilia	MI MI		
	NICKNAME	LAST Castellano	SUFFIX		
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 20956 Somerset Rd Somerset, TX 78069		APT / SUITE #;	CITY; STATE; ZIP CODE	
7 CAMPAIGN TREASURER PHONE	AREA CODE (210)	PHONE NUMBER 365-6663	EXTENSION		
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)				
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)				
9 PERIOD COVERED	Month Day Year 07/01/2024	THROUGH	Month Day Year 09/26/2024		
10 ELECTION	ELECTION DATE Month Day Year 11/05/2024		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any) None		12 OFFICE SOUGHT (if known) State Representative District 80		

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME Castellano, Cecilia (Mrs.)	14 Filer ID (Ethics Commission Filers) 00087851
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15 NOTICE FROM POLITICAL COMMITTEE(S)	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.		
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME	
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	
	<input type="checkbox"/> SPECIFIC		
	COMMITTEE CAMPAIGN TREASURER NAME		
	COMMITTEE CAMPAIGN TREASURER ADDRESS		

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	730.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	58,485.22
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	306.00
	4. TOTAL POLITICAL EXPENDITURES	\$	18,844.33
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	67,449.15
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	170,000.00

17 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Mrs. Cecilia Castellano

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering Printed name of officer administering Title of officer administering oath

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3**

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18 FILER NAME Castellano, Cecilia (Mrs.)		19 Filer ID 00087851	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	45,113.41
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	13,371.81
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$	
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	18,844.33
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/78 Rpt: 4/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aguirre, David <hr/> 6 Contributor address; City; State; Zip Code Tucson, AZ 85701	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Artist		9 Employer (See Instructions) Self
Date 09/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen-Savietta, Cora <hr/> Contributor address; City; State; Zip Code Austin, TX 78752	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Statistician		Employer (See Instructions) Berry Consultants
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Almanza, Debra <hr/> Contributor address; City; State; Zip Code Saginaw, MI 48601	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Apel, Pam <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90272	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Archuleta, Frank <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78240	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Keller Williams

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/78 Rpt: 5/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Babberney, Cameron <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78756	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) massage therapist		9 Employer (See Instructions) self
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baca, Sylvia <hr/> Contributor address; City; State; Zip Code San Dimas, CA 91773	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baggs, Aaron <hr/> Contributor address; City; State; Zip Code Pinole, CA 94564	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MD		Employer (See Instructions) TPMG
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baggs, Aaron <hr/> Contributor address; City; State; Zip Code Pinole, CA 94564	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) MD		Employer (See Instructions) TPMG
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baland, Michael <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78245	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/78 Rpt: 6/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ballard, Jack <hr/> 6 Contributor address; City; State; Zip Code Red Lodge, MT 59068	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) writer/photographer/landlord		9 Employer (See Instructions) self
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnes, Bonner <hr/> Contributor address; City; State; Zip Code Houston, TX 77008	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Investment Advisor		Employer (See Instructions) Cord Investment Management LLC
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barr, Suzanne <hr/> Contributor address; City; State; Zip Code Takoma Park, MD 20912	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Fannie Mae
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barry, Shawn <hr/> Contributor address; City; State; Zip Code Santa Monica, CA 90405	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Costumer		Employer (See Instructions) Entertainment partners
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barthelmy, Eileen <hr/> Contributor address; City; State; Zip Code Mechanicsville, VA 23111	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/78 Rpt: 7/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baumann, Ernest	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Austin, TX 78704		
8 Principal occupation / Job title (See Instructions) consultant		9 Employer (See Instructions) CNA
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beard, Gunilla	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Lynnwood, WA 98037		
Principal occupation / Job title (See Instructions) Tutor		Employer (See Instructions) IXL
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beck, Coleen	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Austin, TX 78703		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beckett, Laurel	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Davis, CA 95618		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) UC Davis
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Behnken, Paula H	Amount of Contribution (\$) \$5.56
Contributor address; City; State; Zip Code Greenfield, MA 01301-9754		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/78 Rpt: 8/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 07/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Jason <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76177	7 Amount of Contribution (\$) \$2.78
8 Principal occupation / Job title (See Instructions) Manufacturing Supervisor		9 Employer (See Instructions) Texas Instruments
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benton, Melissa <hr/> Contributor address; City; State; Zip Code Colorado Springs, CO 80915	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) University of Colorado
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berdine, Jill <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79490	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergsma, Jacob <hr/> Contributor address; City; State; Zip Code Carlsbad, CA 92010	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) tutor		Employer (See Instructions) Jacob Bergsma
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernstein, Zachary <hr/> Contributor address; City; State; Zip Code Washington, DC 20011	Amount of Contribution (\$) \$2.27
Principal occupation / Job title (See Instructions) Senior communications associate		Employer (See Instructions) The Pew Charitable Trusts

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bertan, Michael <hr/> 6 Contributor address; City; State; Zip Code Grass Lake, MI 49240-8808	7 Amount of Contribution (\$) \$2.08
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Betzell, Lindsay <hr/> Contributor address; City; State; Zip Code Charlotte, NC 28205	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Finance program manager		Employer (See Instructions) Florida Power and Light
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bhatt, Bhuvanesh <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78240	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Software developer		Employer (See Instructions) Wolfram Research
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bishop, Michael <hr/> Contributor address; City; State; Zip Code Houston, TX 77094	Amount of Contribution (\$) \$6.25
Principal occupation / Job title (See Instructions) Software consultant		Employer (See Instructions) Improving
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Black, Linda <hr/> Contributor address; City; State; Zip Code Woodbine, MD 21797	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) books		Employer (See Instructions) CPB

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/78 Rpt: 10/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Black, Mary	7 Amount of Contribution (\$) \$8.33
6 Contributor address; City; State; Zip Code Austin, TX 78756		
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Black, Mary	Amount of Contribution (\$) \$2.08
Contributor address; City; State; Zip Code Austin, TX 78756		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boquette, Laura	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Boise, ID 83716		
Principal occupation / Job title (See Instructions) Registered Dietitian		Employer (See Instructions) St Luke's health system
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boren, Rachel	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Las Cruces, NM 88011		
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) New Mexico State University
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brainard, James	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Albuquerque, NM 87122		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/78 Rpt: 11/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brenner, Anita <hr/> 6 Contributor address; City; State; Zip Code Pasadena, CA 91101	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) L/O Torres & Brenner
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briseno, Rolando <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78201	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) artist		Employer (See Instructions) self
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briseno, Rolando <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78201	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) artist		Employer (See Instructions) self
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brodsky, Nina <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) bookkeeper and artist		Employer (See Instructions) self
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brodsky, Nina <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) bookkeeper and artist		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/78 Rpt: 12/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 09/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brodsky, Nina	7 Amount of Contribution (\$) \$2.50
6 Contributor address; City; State; Zip Code Austin, TX 78731		
8 Principal occupation / Job title (See Instructions) bookkeeper and artist		9 Employer (See Instructions) self
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Joanne	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Baltimore, MD 21218		
Principal occupation / Job title (See Instructions) Painter		Employer (See Instructions) Self
Date 08/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Mark	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Austin, TX 78756		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burruss, Kathryn	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Deadwood, OR 97430		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Byrne, Christine	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Berkeley, CA 94705		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/78 Rpt: 13/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 09/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cabrera, David	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Germantown, NY 12526		
8 Principal occupation / Job title (See Instructions) Artist		9 Employer (See Instructions) Self
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calvert, Tommy	Amount of Contribution (\$) \$133.00
Contributor address; City; State; Zip Code San Antonio, TX 78219		
Principal occupation / Job title (See Instructions) County Commissioner		Employer (See Instructions) Bexar County
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cann, Ryan	Amount of Contribution (\$) \$22.73
Contributor address; City; State; Zip Code Lewisville, TX 75067		
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) Pepsico
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlson, Allen	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code San Antonio, TX 78230		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carranza, Susana	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions) Chemical Engineer		Employer (See Instructions) Makel Engineering Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/78 Rpt: 14/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carranza, Susana	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Austin, TX 78701		
8 Principal occupation / Job title (See Instructions) Chemical Engineer		9 Employer (See Instructions) Makel Engineering Inc.
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carranza, Susana	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions) Chemical Engineer		Employer (See Instructions) Makel Engineering Inc.
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castellano, Cecilia	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Von Ormy, TX 78073		
Principal occupation / Job title (See Instructions) Executives		Employer (See Instructions) Azteca Designs & Construction
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castellano, Cecilia	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Von Ormy, TX 78073		
Principal occupation / Job title (See Instructions) Executives		Employer (See Instructions) Azteca Designs & Construction
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castellano, Cecilia	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Von Ormy, TX 78073		
Principal occupation / Job title (See Instructions) Executives		Employer (See Instructions) Azteca Designs & Construction

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/78 Rpt: 15/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castellano, Tony	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Von Ormy, TX 78073		
8 Principal occupation / Job title (See Instructions) Law Enforcement		9 Employer (See Instructions) Texas Lawman Security
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castellano, Tony	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Von Ormy, TX 78073		
Principal occupation / Job title (See Instructions) Law Enforcement		Employer (See Instructions) Texas Lawman Security
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castellano, Tony	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Von Ormy, TX 78073		
Principal occupation / Job title (See Instructions) Law Enforcement		Employer (See Instructions) Texas Lawman Security
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castillo, Pablo	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Corona, CA 92882		
Principal occupation / Job title (See Instructions) Data Engineer		Employer (See Instructions) NA
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castillo, Pablo	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Corona, CA 92882		
Principal occupation / Job title (See Instructions) Big Data Engineer		Employer (See Instructions) Contractor

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/78 Rpt: 16/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 09/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chao, David <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78759	7 Amount of Contribution (\$) \$90.91
8 Principal occupation / Job title (See Instructions) Self-employed		9 Employer (See Instructions) Self
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chavez, Ann <hr/> Contributor address; City; State; Zip Code Arlington, TX 76005	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Fraud professional		Employer (See Instructions) Hancock Whitney
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cobb, Stephen <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$4.17
Principal occupation / Job title (See Instructions) Tennis professional		Employer (See Instructions) SCHP Training
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colina, Hazel E <hr/> Contributor address; City; State; Zip Code Buda, TX 78610	Amount of Contribution (\$) \$8.33
Principal occupation / Job title (See Instructions) Software Developer		Employer (See Instructions) The University of Texas at Austin
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collado, Michael <hr/> Contributor address; City; State; Zip Code Chapel Hill, NC 27514	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Dietitian		Employer (See Instructions) Central Regional Hospital

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/78 Rpt: 17/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collmer, Deborah <hr/> 6 Contributor address; City; State; Zip Code Salt Lake City, UT 84105	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contreras, Colleen <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) San Antonio Water System
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conyngham, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78746-4115	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) researcher		Employer (See Instructions) Self
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crawford, Deborah <hr/> Contributor address; City; State; Zip Code Walla Walla, WA 99362	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) St Mary Medical Center
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crawford, Marshall <hr/> Contributor address; City; State; Zip Code Hot Springs, NC 28743	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Merchant		Employer (See Instructions) Earth Guild

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/78 Rpt: 18/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 09/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crawford, Marshall <hr/> 6 Contributor address; City; State; Zip Code Hot Springs, NC 28743	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Merchant		9 Employer (See Instructions) Earth Guild
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crawford Smith, Dorothy <hr/> Contributor address; City; State; Zip Code Eaton, OH 45320	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cross, Kathy <hr/> Contributor address; City; State; Zip Code Sabinal, TX 78881	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Da Silva, Rachel <hr/> Contributor address; City; State; Zip Code Olympia, WA 98502	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dasgupta, Bhaskar <hr/> Contributor address; City; State; Zip Code Chicago, IL 60607	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) UIC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/78 Rpt: 19/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 07/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dasgupta, Bhaskar <hr/> 6 Contributor address; City; State; Zip Code Chicago, IL 60607	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) UIC
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dasgupta, Bhaskar <hr/> Contributor address; City; State; Zip Code Chicago, IL 60607	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) UIC
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Jean <hr/> Contributor address; City; State; Zip Code Hoquiam, WA 98550	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) 303 Cottage Ave		Employer (See Instructions) none
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Day, Bill <hr/> Contributor address; City; State; Zip Code Griffin, GA 30224	Amount of Contribution (\$) \$4.16
Principal occupation / Job title (See Instructions) retired teacher		Employer (See Instructions) University System of Georgia
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Day, Maureen <hr/> Contributor address; City; State; Zip Code Seattle, WA 98117	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/78 Rpt: 20/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De Aragao, Darlene	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Spring, TX 77379		
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Oxy
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Debeer Charno, Jenny	Amount of Contribution (\$) \$1.37
Contributor address; City; State; Zip Code Bayville, NY 11709		
Principal occupation / Job title (See Instructions) Massage therapist		Employer (See Instructions) Self
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Decesare, Matthew	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Uvalde, TX 78801		
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Walgreens
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Democracy Engine LLC	Amount of Contribution (\$) \$52.56
Contributor address; City; State; Zip Code Washington, DC 20001		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dent, Sharon	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Bellaire, TX 77401		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) MD Anderson Cancer Center

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/78 Rpt: 21/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deterling, Sheri <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75206	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Self
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devore, Michael <hr/> Contributor address; City; State; Zip Code Naperville, IL 60540	Amount of Contribution (\$) \$2.27
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devore, Michael <hr/> Contributor address; City; State; Zip Code Naperville, IL 60540	Amount of Contribution (\$) \$2.27
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diehl, D L Chris <hr/> Contributor address; City; State; Zip Code Mercer Island, WA 98040	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Group Health Permanente
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diehl, D L Chris <hr/> Contributor address; City; State; Zip Code Mercer Island, WA 98040	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Group Health Permanente

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/78 Rpt: 22/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 09/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doerr, Anastasia <hr/> 6 Contributor address; City; State; Zip Code Kirkland, WA 98034	7 Amount of Contribution (\$) \$22.73
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doherty, Joyce <hr/> Contributor address; City; State; Zip Code Silver Spring, MD 20906	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Program Administrator		Employer (See Instructions) The ASCII Group Inc.
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dorman, Andrew <hr/> Contributor address; City; State; Zip Code Owens Cross Roads, AL 35763	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Downs, Patricia <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Du Ron, Cris <hr/> Contributor address; City; State; Zip Code Houston, TX 77057	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/78 Rpt: 23/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dudley, Sandra	7 Amount of Contribution (\$) \$6.25
6 Contributor address; City; State; Zip Code Forks, WA 98331		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dukes, Thomas	Amount of Contribution (\$) \$22.73
Contributor address; City; State; Zip Code San Antonio, TX 78209		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dyer, Sharon	Amount of Contribution (\$) \$8.33
Contributor address; City; State; Zip Code Washington, DC 20012		
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Federal government
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dyer, Sharon	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Washington, DC 20012		
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Federal government
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) E Kocerber, Masato	Amount of Contribution (\$) \$9.09
Contributor address; City; State; Zip Code Cambridge, MA 02139		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) MIT

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/78 Rpt: 24/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edmonson, Robert	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Washington, DC 20001		
8 Principal occupation / Job title (See Instructions) Congressional Aide		9 Employer (See Instructions) U.S. House of Representatives
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eickenhorst, Charles	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Houston, TX 77006		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elkins, James	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Spring, TX 77381		
Principal occupation / Job title (See Instructions) Uber driver		Employer (See Instructions) Self
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellinger, Caleb	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Buda, TX 78610		
Principal occupation / Job title (See Instructions) Tax Advisor		Employer (See Instructions) Self
Date 09/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Espinoza, Javier	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code San Antonio, TX 78216		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Espinoza & Brock PLLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/78 Rpt: 25/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Estep, Michilines <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77009	7 Amount of Contribution (\$) \$2.27
8 Principal occupation / Job title (See Instructions) Rater		9 Employer (See Instructions) ETS
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eveland, Mary <hr/> Contributor address; City; State; Zip Code Roebuck, SC 29376	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farrar, Bruce <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fenning, Grant <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90038	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Self
Date 07/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fine, Mary Ellen <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$4.16
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/78 Rpt: 26/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fine, Mary Ellen <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78745	7 Amount of Contribution (\$) \$4.16
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) None
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fine, Mary Ellen <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$4.16
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fish, Jeremy <hr/> Contributor address; City; State; Zip Code Oakland, CA 94611	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) program director		Employer (See Instructions) JMH
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flores, Hector <hr/> Contributor address; City; State; Zip Code Duncanville, TX 75137	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flores, Rodrigo <hr/> Contributor address; City; State; Zip Code Rancho Cordova, CA 95670	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) CCC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/78 Rpt: 27/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foster, Be <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77095	7 Amount of Contribution (\$) \$2.27
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fowler, Robert <hr/> Contributor address; City; State; Zip Code Austin, TX 78758	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Restaurant Employee		Employer (See Instructions) Home Slice Pizza
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fox, Patrick <hr/> Contributor address; City; State; Zip Code Austin, TX 78722	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Technology Director		Employer (See Instructions) SapientRazorfish
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frazier, Randy <hr/> Contributor address; City; State; Zip Code Austin, TX 78739	Amount of Contribution (\$) \$4.17
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frazier, Tonda <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$9.09
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/78 Rpt: 28/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeberg, Greg <hr/> 6 Contributor address; City; State; Zip Code Windsor, CO 80550	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Park worker		9 Employer (See Instructions) State of Colorado
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeman, Rosemary <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76132	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frost, Lucy <hr/> Contributor address; City; State; Zip Code Manchaca, TX 78652	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Domingo A <hr/> Contributor address; City; State; Zip Code Dallas, TX 75247	Amount of Contribution (\$) \$25,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia Md, Catalina E <hr/> Contributor address; City; State; Zip Code Dallas, TX 75231	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/78 Rpt: 29/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrard, Julianne	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code College Station, TX 77845		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gartner, Daniel	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code Oro Valley, AZ 85755		
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) none
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Isidro	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Spring, TX 77388		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) GLO
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gebow, David	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Guerneville, CA 95446		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Georges, Chris	Amount of Contribution (\$) \$2.09
Contributor address; City; State; Zip Code Los Angeles, CA 90049		
Principal occupation / Job title (See Instructions) Coach		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/78 Rpt: 30/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson Stoodley, Sheila	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Lowell, MA 01852		
8 Principal occupation / Job title (See Instructions) Independent Journalist		9 Employer (See Instructions) Self
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilchrist, Ann	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Glen Burnie, MD 21060		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilman, Joe	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Lawrence, KS 66049-2850		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glober, Russell	Amount of Contribution (\$) \$8.33
Contributor address; City; State; Zip Code Sherman Oaks, CA 91403-3058		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glatter, Mark	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code Minneapolis, MN 55416		
Principal occupation / Job title (See Instructions) sales and marketing		Employer (See Instructions) self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/78 Rpt: 31/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 07/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gold, Dean	7 Amount of Contribution (\$) \$1.67
6 Contributor address; City; State; Zip Code Baltimore, MD 21230		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Maria	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Houston, TX 77061		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) University of Houston
Date 08/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grannan, Shirley	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code San Marcos, CA 92078		
Principal occupation / Job title (See Instructions) Technical Writer		Employer (See Instructions) Gulf State Marketing
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grasso, Elyse	Amount of Contribution (\$) \$2.09
Contributor address; City; State; Zip Code Boulder, CO 80303-9500		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenfield, Lawrence	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Plainview, NY 11803		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/78 Rpt: 32/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 09/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gross, Mary	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Kalaheo, HI 96741		
8 Principal occupation / Job title (See Instructions) Sales Associate		9 Employer (See Instructions) Na Hoku
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guadagnolo, Ashleigh	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Houston, TX 77030		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) MD Anderson
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Gloria	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code San Antonio, TX 78240		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ha, Henry	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Dallas, TX 75219		
Principal occupation / Job title (See Instructions) Lead Analytics Consultant		Employer (See Instructions) Wells Fargo & Company
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haden, Lorri	Amount of Contribution (\$) \$4.16
Contributor address; City; State; Zip Code Austin, TX 78757		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/78 Rpt: 33/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haile, Suzette <hr/> 6 Contributor address; City; State; Zip Code Kirkland, WA 98034	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harding, Barry <hr/> Contributor address; City; State; Zip Code Houston, TX 77005	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hariguchi, Yoichi <hr/> Contributor address; City; State; Zip Code Menlo Park, CA 94025	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) NTT America Network Innovations Inc.
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harper, Chris <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78247	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haynes, Carole <hr/> Contributor address; City; State; Zip Code Lockhart, TX 78644	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/78 Rpt: 34/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heeb, William <hr/> 6 Contributor address; City; State; Zip Code Cincinnati, OH 45215	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hennings, Teresa <hr/> Contributor address; City; State; Zip Code Atlanta, GA 30341	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Oren <hr/> Contributor address; City; State; Zip Code Coos Bay, OR 97420	Amount of Contribution (\$) \$2.27
Principal occupation / Job title (See Instructions) Telecom engineer		Employer (See Instructions) SYKES enterprises inc.
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Patricia <hr/> Contributor address; City; State; Zip Code Live Oak, TX 78233	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) 7706 Forest Magic Court Live Oak Texas 78233
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hetz, Kara <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19125	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Jewelry Designer		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/78 Rpt: 35/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Gretchen	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Warrensburg, MO 64093		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Gretchen	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Warrensburg, MO 64093		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howe, David	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Oakland, CA 94609-1063		
Principal occupation / Job title (See Instructions) Economist		Employer (See Instructions) self
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughes, Jessica	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Williamsburg, VA 23188-1549		
Principal occupation / Job title (See Instructions) IT Consultant		Employer (See Instructions) Self Employed
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Inboden, Aaron	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Lancaster, OH 43130		
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Giant Eagle

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/78 Rpt: 36/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Irot, Scott <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78744	7 Amount of Contribution (\$) \$8.33
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Zen Insurance Services LLC
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacobs, Yolonda <hr/> Contributor address; City; State; Zip Code Miami, FL 33157	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Homer Bonner Jacobs Ortiz
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jasne, Adam <hr/> Contributor address; City; State; Zip Code Cheshire, CT 06410	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Yale University
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jentsch, Virginia <hr/> Contributor address; City; State; Zip Code Arlington, TX 76016	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnston, Benjamin <hr/> Contributor address; City; State; Zip Code Austin, TX 78705	Amount of Contribution (\$) \$8.34
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) Austin Community College

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/78 Rpt: 37/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 07/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Melissa <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78703	7 Amount of Contribution (\$) \$20.83
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jordan, Janet <hr/> Contributor address; City; State; Zip Code Milford, CT 06460	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Appeals Repu		Employer (See Instructions) UnitedHealthcare
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jurena, James <hr/> Contributor address; City; State; Zip Code Edgewater, MD 21037	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Asst. Family Teacher		Employer (See Instructions) Boys Town
Date 08/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kadaahaw-Kelber, Arlene <hr/> Contributor address; City; State; Zip Code Plano, TX 75023	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaiser, Barbara <hr/> Contributor address; City; State; Zip Code Menlo Park, CA 94026	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/78 Rpt: 38/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kajogo, Mwenda	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Raleigh, NC 27603		
8 Principal occupation / Job title (See Instructions) Customer Service		9 Employer (See Instructions) Jerry's Artarama
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keysor, Georgia	Amount of Contribution (\$) \$8.34
Contributor address; City; State; Zip Code Austin, TX 78757		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Gareth	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code New York, NY 10040		
Principal occupation / Job title (See Instructions) Environmental Engineer		Employer (See Instructions) NYC DEP
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kiriakos, Grace	Amount of Contribution (\$) \$18.00
Contributor address; City; State; Zip Code Richmond, CA 94804		
Principal occupation / Job title (See Instructions) therapist		Employer (See Instructions) grace Kiriakos
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kitchen`, Sara	Amount of Contribution (\$) \$4.16
Contributor address; City; State; Zip Code Austin, TX 78756		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) TSBVI

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/78 Rpt: 39/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 09/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koenig, Theresa <hr/> 6 Contributor address; City; State; Zip Code Duluth, MN 55803	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Flower farmer		9 Employer (See Instructions) Self
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koger, Jennifer <hr/> Contributor address; City; State; Zip Code Austin, TX 78737	Amount of Contribution (\$) \$4.55
Principal occupation / Job title (See Instructions) construction estimator		Employer (See Instructions) self employed
Date 09/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Korth-Juricek, Ashley <hr/> Contributor address; City; State; Zip Code Austin, TX 78752	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) AKJ Investments
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kosobud, Terry <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kragen, Jules <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94707	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/78 Rpt: 40/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krizek, Neil <hr/> 6 Contributor address; City; State; Zip Code Alexandria, VA 22309	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) CRSC
Date 07/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kugle, Cherry <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$4.16
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) La Rue, Budd <hr/> Contributor address; City; State; Zip Code Lompoc, CA 93438	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Ball Horticultural
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laine, Marsha <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$2.08
Principal occupation / Job title (See Instructions) online sales		Employer (See Instructions) marsha laine
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laine, Marsha <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) online sales		Employer (See Instructions) marsha laine

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/78 Rpt: 41/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamb, Will	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code College Station, TX 77840		
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Texas A&M University
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langford, Nancy	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Houston, TX 77098		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larkin, Jonathan	Amount of Contribution (\$) \$4.55
Contributor address; City; State; Zip Code Frisco, TX 75033		
Principal occupation / Job title (See Instructions) Digital Marketing Manager		Employer (See Instructions) Asset Panda
Date 07/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leclercq, Terri	Amount of Contribution (\$) \$4.17
Contributor address; City; State; Zip Code Austin, TX 88751		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Thomas	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code San Antonio, TX 78229		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/78 Rpt: 42/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 09/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leidigh, Christopher	7 Amount of Contribution (\$) \$4.17
6 Contributor address; City; State; Zip Code Providence, RI 02906		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lemmond, Byron	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Katy, TX 77449-7504		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lemmond, Byron	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code Katy, TX 77449-7504		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Kelly	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Riverside, IL 60546		
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Gallagher Bassett
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Roshelle	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Odenton, MD 21113-3759		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/78 Rpt: 43/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Limerick, Casey	7 Amount of Contribution (\$) \$8.33
6 Contributor address; City; State; Zip Code Austin, TX 78731		
8 Principal occupation / Job title (See Instructions) Greenhouse Specialist		9 Employer (See Instructions) UT
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lindner, Carole	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Friday Harbor, WA 98250		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Logue, Paul	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Rancho Cucamonga, CA 91730		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lokensgard, Mark	Amount of Contribution (\$) \$6.25
Contributor address; City; State; Zip Code San Antonio, TX 78254		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) St. Mary's University
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Long, Theresa	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Estero, FL 33928		
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Premier Motorcars

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/78 Rpt: 44/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Cathy	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Fullerton, CA 92833		
8 Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions) Media News Group
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lucas, Marydell	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code San Rafael, CA 94901		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lynch, Michael	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Baltimore, MD 21218		
Principal occupation / Job title (See Instructions) Carma's Cafe		Employer (See Instructions) Restaurateur
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Macnaughton, Beverly	Amount of Contribution (\$) \$4.17
Contributor address; City; State; Zip Code Austin, TX 78750		
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none
Date 09/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Macnaughton, Beverly	Amount of Contribution (\$) \$8.33
Contributor address; City; State; Zip Code Austin, TX 78750		
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/78 Rpt: 45/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maddock, John <hr/> 6 Contributor address; City; State; Zip Code Rockport, TX 78382	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) retail		9 Employer (See Instructions) sfc inc.
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mangini, Lauren <hr/> Contributor address; City; State; Zip Code Boston, MA 02125	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Research Manager		Employer (See Instructions) Gerson Lehrman Group
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marconi, John <hr/> Contributor address; City; State; Zip Code Rio Vista, TX 76093	Amount of Contribution (\$) \$2.08
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions) self employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marrufo, Christi <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$22.73
Principal occupation / Job title (See Instructions) IT EXECUTIVE		Employer (See Instructions) Applied materials
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Cynthia <hr/> Contributor address; City; State; Zip Code Houston, TX 77092	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) Pearson

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/78 Rpt: 46/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, James <hr/> 6 Contributor address; City; State; Zip Code Las Cruces, NM 88005	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Robert <hr/> Contributor address; City; State; Zip Code Leakey, TX 78873	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mask, Lonnie <hr/> Contributor address; City; State; Zip Code Rockwall, TX 75032	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Software engineer		Employer (See Instructions) L3Harris
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matlock, Trevin <hr/> Contributor address; City; State; Zip Code Wrightwood, CA 92397	Amount of Contribution (\$) \$4.17
Principal occupation / Job title (See Instructions) Sales Rep		Employer (See Instructions) Faherty & Assoc
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mccall, Thomas <hr/> Contributor address; City; State; Zip Code Bronx, NY 10462	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/78 Rpt: 47/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mccann, John <hr/> 6 Contributor address; City; State; Zip Code Chevy Chase, MD 20815	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) Legatus6
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mccusker, Eileen <hr/> Contributor address; City; State; Zip Code Morgantown, WV 26508	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Substitute teacher		Employer (See Instructions) Monongalia County Schools
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mccutchen, Mila <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$4.16
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Daman Consulting Inc.
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcgee, Michael <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76123	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Petroleum Landman		Employer (See Instructions) Self
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcgrane, Margaret <hr/> Contributor address; City; State; Zip Code Houston, TX 77057	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/78 Rpt: 48/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcknight, Barbara	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Austin, TX 78704		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Medina, Manuel	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code San Antonio, TX 78257		
Principal occupation / Job title (See Instructions) Legislative Aide		Employer (See Instructions) State of Texas
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meehan, Katherine	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Golden Valley, MN 55422		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mellon, Robert	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Tucson, AZ 85701		
Principal occupation / Job title (See Instructions) programmer		Employer (See Instructions) self
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mensching, John	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Austin, TX 78745-3636		
Principal occupation / Job title (See Instructions) Software Developer		Employer (See Instructions) NetSpend Corporation

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/78 Rpt: 49/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mercado, Jaime <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77265	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) District Attorney		9 Employer (See Instructions) Harris County
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merrill, Charles <hr/> Contributor address; City; State; Zip Code Manhattan, NY 10023	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) psychologist		Employer (See Instructions) self
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Messina, Kathryn <hr/> Contributor address; City; State; Zip Code Spring, TX 77382	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Assistant		Employer (See Instructions) Norilyn
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, James <hr/> Contributor address; City; State; Zip Code Conroe, TX 77348	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael, Esther <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78232	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/78 Rpt: 50/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Micheletti, Patrick <hr/> 6 Contributor address; City; State; Zip Code Salinas, CA 93908	7 Amount of Contribution (\$) \$4.55
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Self
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Middleton-Davis, Ashley <hr/> Contributor address; City; State; Zip Code Denver, CO 80210	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) Cytoskeleton Inc
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ming, Paul <hr/> Contributor address; City; State; Zip Code Kirkland, WA 98034	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Microsoft Corporation
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mirkovic, Nena <hr/> Contributor address; City; State; Zip Code Spring, TX 77382	Amount of Contribution (\$) \$9.09
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) Millennium
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morales, Daniel <hr/> Contributor address; City; State; Zip Code Houston, TX 77098	Amount of Contribution (\$) \$9.09
Principal occupation / Job title (See Instructions) Law Prof		Employer (See Instructions) U Houston

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/78 Rpt: 51/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 09/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgan, Michael	7 Amount of Contribution (\$) \$24.00
6 Contributor address; City; State; Zip Code Collinsville, IL 62234		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mormando, Garrett	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Carrizo Springs, TX 78834		
Principal occupation / Job title (See Instructions) Self-Employed		Employer (See Instructions) Artist
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mormando, Garrett	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Carrizo Springs, TX 78834		
Principal occupation / Job title (See Instructions) Self-Employed		Employer (See Instructions) Artist
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mormando, Garrett	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Carrizo Springs, TX 78834		
Principal occupation / Job title (See Instructions) Self-Employed		Employer (See Instructions) Artist
Date 09/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mormando, Garrett	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Carrizo Springs, TX 78834		
Principal occupation / Job title (See Instructions) Self-Employed		Employer (See Instructions) Artist

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/78 Rpt: 52/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrell, Lisa <hr/> 6 Contributor address; City; State; Zip Code Raleigh, NC 27608	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Patient Navigator		9 Employer (See Instructions) Duke Health
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murray, Janet <hr/> Contributor address; City; State; Zip Code Atlanta, GA 30309	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Prof		Employer (See Instructions) GaT
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mytron, Kate <hr/> Contributor address; City; State; Zip Code Portland, OR 97266	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nalam, Roopa <hr/> Contributor address; City; State; Zip Code Houston, TX 77030	Amount of Contribution (\$) \$22.73
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Baylor college of medicine
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nash, Jeremy <hr/> Contributor address; City; State; Zip Code Lombard, IL 60148	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Library Page		Employer (See Instructions) Helen Plum Library

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/78 Rpt: 53/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neer, Jeffrey	7 Amount of Contribution (\$) \$4.55
6 Contributor address; City; State; Zip Code Leander, TX 78641		
8 Principal occupation / Job title (See Instructions) Software Developer		9 Employer (See Instructions) Amazon Inc
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neri, Philip	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Spring, TX 77379		
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Halliburton Inc
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nesemeier, Ann	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code Bedford, TX 76021		
Principal occupation / Job title (See Instructions) Pricing Mgr		Employer (See Instructions) Applied Industrial Technologies
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newman, Joyce	Amount of Contribution (\$) \$36.00
Contributor address; City; State; Zip Code Coral Gables, FL 33146		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nolan, Joretta	Amount of Contribution (\$) \$4.55
Contributor address; City; State; Zip Code Cypress, TX 77433		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/78 Rpt: 54/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Rourke, Jennifer <hr/> 6 Contributor address; City; State; Zip Code Robbinsdale, MN 55422	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Odonnell, Jane <hr/> Contributor address; City; State; Zip Code Orangevale, CA 95662	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ogden, Jane E <hr/> Contributor address; City; State; Zip Code Marshall, TX 75672	Amount of Contribution (\$) \$8.34
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olivares, Michael <hr/> Contributor address; City; State; Zip Code Helotes, TX 78023	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ong, Jasmine <hr/> Contributor address; City; State; Zip Code Colorado Springs, CO 80918	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/78 Rpt: 55/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 09/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orenstein, Rosa <hr/> 6 Contributor address; City; State; Zip Code Duncanville, TX 75137	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Orenstein Law Group P.C.
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Padilla, Michael <hr/> Contributor address; City; State; Zip Code Cordova, TN 38018	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Page, Jennifer <hr/> Contributor address; City; State; Zip Code Somerville, MA 02143	Amount of Contribution (\$) \$22.73
Principal occupation / Job title (See Instructions) Engineering Manager		Employer (See Instructions) ezCater
Date 09/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palomares, Roman <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76120	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Housing Consultant		Employer (See Instructions) Self
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palomino, Irma <hr/> Contributor address; City; State; Zip Code Von Ormy, TX 78073	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/78 Rpt: 56/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Panagakos, Jean <hr/> 6 Contributor address; City; State; Zip Code Kensington, MD 20895	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patlan, Linda <hr/> Contributor address; City; State; Zip Code Austin, TX 78750	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) Martinez & Associates
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Payne, Benton <hr/> Contributor address; City; State; Zip Code Dallas, TX 75206	Amount of Contribution (\$) \$4.55
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) MBP Advisors
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Payne, Benton <hr/> Contributor address; City; State; Zip Code Dallas, TX 75206	Amount of Contribution (\$) \$2.27
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) MBP Advisors
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Payne, Benton <hr/> Contributor address; City; State; Zip Code Dallas, TX 75206	Amount of Contribution (\$) \$4.55
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) MBP Advisors

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/78 Rpt: 57/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pena, Roman <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78221	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Alfredo <hr/> Contributor address; City; State; Zip Code Laredo, TX 78041	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Laredo ISD
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Mario <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76110	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Linebarger LLP
Date 07/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Sylvia <hr/> Contributor address; City; State; Zip Code Austin, TX 78752	Amount of Contribution (\$) \$8.33
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piper, Evan <hr/> Contributor address; City; State; Zip Code Austin, TX 78758	Amount of Contribution (\$) \$4.55
Principal occupation / Job title (See Instructions) Bookseller		Employer (See Instructions) Half Price Books

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/78 Rpt: 58/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Polens, Jared <hr/> 6 Contributor address; City; State; Zip Code North Adams, MA 01247	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) cook		9 Employer (See Instructions) Buxton School
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pollard, Kathleen <hr/> Contributor address; City; State; Zip Code Rogers, AR 72758	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Pediatric physician		Employer (See Instructions) Arkansas Children's Medical Group
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Potter, Mark <hr/> Contributor address; City; State; Zip Code East Petersburg, PA 17520	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) EE		Employer (See Instructions) retired
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powers, Sheryl <hr/> Contributor address; City; State; Zip Code New Waverly, TX 77358	Amount of Contribution (\$) \$9.09
Principal occupation / Job title (See Instructions) Instructor		Employer (See Instructions) SAIC
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Purcell, Steven <hr/> Contributor address; City; State; Zip Code Burlington, WA 98233	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Microsoft

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 56/78 Rpt: 59/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Purinton, Lila	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Point Reyes, CA 94956		
8 Principal occupation / Job title (See Instructions) Media Strategist		9 Employer (See Instructions) Self
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quinones, Debra	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Seattle, WA 98103		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raffaelli, Paulo	Amount of Contribution (\$) \$2.09
Contributor address; City; State; Zip Code San Francisco, CA 94112		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Cisco Meraki
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Randal, Brook	Amount of Contribution (\$) \$20.84
Contributor address; City; State; Zip Code Austin, TX 78751		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rapport, Deborah	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Orange, CA 92869		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/78 Rpt: 60/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ratajak, Ellen <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98177	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Redifer, Betty <hr/> Contributor address; City; State; Zip Code Rochester, NY 14617	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rees, Barry <hr/> Contributor address; City; State; Zip Code Alpine, TX 79830	Amount of Contribution (\$) \$14.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ressin, Jeff <hr/> Contributor address; City; State; Zip Code Vienna, VA 22180	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) consultant		Employer (See Instructions) self
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Mark <hr/> Contributor address; City; State; Zip Code Austin, TX 78705	Amount of Contribution (\$) \$2.09
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 58/78 Rpt: 61/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rice, Harvey <hr/> 6 Contributor address; City; State; Zip Code Galveston, TX 77554	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richards, Helen <hr/> Contributor address; City; State; Zip Code Vista, CA 92084	Amount of Contribution (\$) \$4.17
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Carl <hr/> Contributor address; City; State; Zip Code Del Valle, TX 78617	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robbins, Lynn <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Dianna <hr/> Contributor address; City; State; Zip Code Houston, TX 77025	Amount of Contribution (\$) \$4.16
Principal occupation / Job title (See Instructions) Data Manager/Analyst		Employer (See Instructions) UT MD Anderson Cancer Center

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 59/78 Rpt: 62/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Kelley	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Manhattan Beach, CA 90266		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robillard, Melinda	Amount of Contribution (\$) \$8.33
Contributor address; City; State; Zip Code Austin, TX 78723		
Principal occupation / Job title (See Instructions) HR person		Employer (See Instructions) UT Austin
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Michael	Amount of Contribution (\$) \$4.55
Contributor address; City; State; Zip Code Baltimore, MD 21218		
Principal occupation / Job title (See Instructions) Systems Engineer		Employer (See Instructions) AURA
Date 09/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robledo, Humberto	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Pearsall, TX 78061-3415		
Principal occupation / Job title (See Instructions) pest control		Employer (See Instructions) self-employed
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Kathryn	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78757		
Principal occupation / Job title (See Instructions) Editor		Employer (See Instructions) self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 60/78 Rpt: 63/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Kathryn <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78757	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Editor		9 Employer (See Instructions) self
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Kathryn <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Editor		Employer (See Instructions) self
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Romo, Lawrence <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78253	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) S Kivikko, Jill <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$2.09
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) Jill Kivikko
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salas-Porras, Ana Luisa <hr/> Contributor address; City; State; Zip Code Austin, TX 78756-2912	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 61/78 Rpt: 64/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salazar, Debbie	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Florence, OR 97439		
8 Principal occupation / Job title (See Instructions) Registered Nurse Public Health Nurse		9 Employer (See Instructions) Retired
Date 07/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salazar, Placido	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Universal City, TX 78148		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salisbury, James	Amount of Contribution (\$) \$9.09
Contributor address; City; State; Zip Code Austin, TX 78759		
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) USACE
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salyer, Allen	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Troy, MI 48085		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sargent, Steven	Amount of Contribution (\$) \$4.55
Contributor address; City; State; Zip Code Redwood City, CA 94062		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 62/78 Rpt: 65/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Ron	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code New Braunfels, TX 78132		
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed
Date 07/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schneider, Lisa	Amount of Contribution (\$) \$8.34
Contributor address; City; State; Zip Code Austin, TX 78752		
Principal occupation / Job title (See Instructions) Musician/Teacher		Employer (See Instructions) Self
Date 08/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schneider, Lisa	Amount of Contribution (\$) \$23.08
Contributor address; City; State; Zip Code Austin, TX 78752		
Principal occupation / Job title (See Instructions) Musician/Teacher		Employer (See Instructions) Self
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schneider, Lisa	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Austin, TX 78752		
Principal occupation / Job title (See Instructions) Musician/Teacher		Employer (See Instructions) Self
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Edward L	Amount of Contribution (\$) \$8.34
Contributor address; City; State; Zip Code Austin, TX 78757		
Principal occupation / Job title (See Instructions) Database Developer		Employer (See Instructions) Scott Resources

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 63/78 Rpt: 66/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Senders, Warren <hr/> 6 Contributor address; City; State; Zip Code Medford, MA 02155	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) music teacher		9 Employer (See Instructions) self-employed
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sewell, Rose M <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78251	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) customer service rep-HR		Employer (See Instructions) Accenture
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shapiro, Joel <hr/> Contributor address; City; State; Zip Code Alexandria, VA 22304-7400	Amount of Contribution (\$) \$11.11
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharma, Rajiv <hr/> Contributor address; City; State; Zip Code Beaverton, OR 97006	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Economist		Employer (See Instructions) Portland State University
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shoecraft, Paula <hr/> Contributor address; City; State; Zip Code Washington, DC 20009	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 64/78 Rpt: 67/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simonsen, Mitchell <hr/> 6 Contributor address; City; State; Zip Code Charleston, SC 29412	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Carpenter		9 Employer (See Instructions) SLH Woodworks
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simson, Maria <hr/> Contributor address; City; State; Zip Code New York, NY 10024	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Singer, Donald <hr/> Contributor address; City; State; Zip Code Longmont, CO 80501	Amount of Contribution (\$) \$6.25
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slate, Claudia <hr/> Contributor address; City; State; Zip Code Everett, WA 98201	Amount of Contribution (\$) \$2.27
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Daniel <hr/> Contributor address; City; State; Zip Code Eaton, OH 45320	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 65/78 Rpt: 68/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snow, Mollie <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78750-8140	7 Amount of Contribution (\$) \$2.08
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snow, Mollie <hr/> Contributor address; City; State; Zip Code Austin, TX 78750-8140	Amount of Contribution (\$) \$2.09
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snow, Mollie <hr/> Contributor address; City; State; Zip Code Austin, TX 78750-8140	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Solt, Jamie <hr/> Contributor address; City; State; Zip Code Villa Park, IL 60181	Amount of Contribution (\$) \$8.34
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sonneville, Colter <hr/> Contributor address; City; State; Zip Code Austin, TX 78721	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Planner		Employer (See Instructions) Self employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 66/78 Rpt: 69/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spain, Diana <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78751	7 Amount of Contribution (\$) \$2.08
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spain, Diana <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$2.08
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spain, Diana <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$2.08
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spain, Diana <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$2.08
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spellberg, Denise <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$4.55
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) University of Texas Austin

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 67/78 Rpt: 70/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 09/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spinak, Jane <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10027	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Law Professor		9 Employer (See Instructions) Columbia Law School
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spindler, Jolie <hr/> Contributor address; City; State; Zip Code Pittsburgh, PA 15215	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) library assistant		Employer (See Instructions) public library
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Staley, Ryan <hr/> Contributor address; City; State; Zip Code Castro Valley, CA 94552	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) Castro Valley Unified School District
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stein, Annie <hr/> Contributor address; City; State; Zip Code Houston, TX 77008	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Houston independent school district
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stein, Janet <hr/> Contributor address; City; State; Zip Code Tucson, AZ 85750	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 68/78 Rpt: 71/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 07/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Nancy <hr/> 6 Contributor address; City; State; Zip Code Kyle, TX 78640	7 Amount of Contribution (\$) \$8.34
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Shirley <hr/> Contributor address; City; State; Zip Code Arvada, CO 80002	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, Dorothy <hr/> Contributor address; City; State; Zip Code Wyncote, PA 19095	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Street, Laura <hr/> Contributor address; City; State; Zip Code Fayetteville, AR 72703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Suneson, Neil <hr/> Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 69/78 Rpt: 72/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sweet, Dana	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Houston, TX 77007		
8 Principal occupation / Job title (See Instructions) Energy Infrastructure		9 Employer (See Instructions) Grid United
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tarantina, Mark	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Ossining, NY 10562		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tarantina, Mark	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Ossining, NY 10562		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Matthew	Amount of Contribution (\$) \$9.09
Contributor address; City; State; Zip Code Houston, TX 77007-7773		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Deepwater Corrosion Services Inc.
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teitelbaum, Martha	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Kensington, MD 20895		
Principal occupation / Job title (See Instructions) health researcher		Employer (See Instructions) self

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 70/78 Rpt: 73/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Democratic Woman <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78703	7 Amount of Contribution (\$) \$2,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas State Teachers Association Political Action Committee <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomason, Heidi <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78248	Amount of Contribution (\$) \$13.64
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Self
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomason, Heidi <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78248	Amount of Contribution (\$) \$26.82
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Self
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomason, Heidi <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78248	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Self

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 71/78 Rpt: 74/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thornton, Howard <hr/> 6 Contributor address; City; State; Zip Code San Francisco, CA 94110	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tidwell, Jennifer <hr/> Contributor address; City; State; Zip Code Addison, TX 75001	Amount of Contribution (\$) \$33.34
Principal occupation / Job title (See Instructions) Producer		Employer (See Instructions) C Prompt Games
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tidwell, Jennifer <hr/> Contributor address; City; State; Zip Code Addison, TX 75001	Amount of Contribution (\$) \$33.34
Principal occupation / Job title (See Instructions) Producer		Employer (See Instructions) C Prompt Games
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tijerina, Michael <hr/> Contributor address; City; State; Zip Code Plano, TX 75025	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Home Health		Employer (See Instructions) Self
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tilley, Shawn <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94127	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) AT&T

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 72/78 Rpt: 75/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 09/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tubbesing, Carole <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78204-1717	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions) Phyllis Browning Company
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Victor, Matthew <hr/> Contributor address; City; State; Zip Code Bel Air, MD 21015	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Business Consultant		Employer (See Instructions) USVC
Date 07/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vormelker, Eric <hr/> Contributor address; City; State; Zip Code Austin, TX 78752	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Technical Coordinator		Employer (See Instructions) Texas Health and Human Services Commission
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waddell, Christopher <hr/> Contributor address; City; State; Zip Code Frisco, TX 75036	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Human Resources		Employer (See Instructions) not currently employed
Date 07/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagman, Marcy <hr/> Contributor address; City; State; Zip Code El Paso, TX 79912	Amount of Contribution (\$) \$2.22
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 73/78 Rpt: 76/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 07/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagner, Nancy <hr/> 6 Contributor address; City; State; Zip Code Fort Collins, CO 80526	7 Amount of Contribution (\$) \$5.56
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Marcia <hr/> Contributor address; City; State; Zip Code Englewood, CO 80113	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) na
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Susan <hr/> Contributor address; City; State; Zip Code Ottsville, PA 18942	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) designer		Employer (See Instructions) self
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walle, Armando <hr/> Contributor address; City; State; Zip Code Houston, TX 77039	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) State Representative		Employer (See Instructions) Texas House of Representatives
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wang, Lawrence <hr/> Contributor address; City; State; Zip Code San Diego, CA 92122	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Software		Employer (See Instructions) Dynamic Digital Depth (DDD)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 74/78 Rpt: 77/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ward, M	7 Amount of Contribution (\$) \$4.16
6 Contributor address; City; State; Zip Code Pflugerville, TX 78660		
8 Principal occupation / Job title (See Instructions) RN		9 Employer (See Instructions) Ascension
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ward, M	Amount of Contribution (\$) \$4.16
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Ascension
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ward, M	Amount of Contribution (\$) \$4.16
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Ascension
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weis, Gaythia	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Longmont, CO 80503		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wells, Mona	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Vienna, VA 22182-2022		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 75/78 Rpt: 78/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Welsh, Robert <hr/> 6 Contributor address; City; State; Zip Code Oak Park, CA 91377	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) UCLA
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whisler, Sandra <hr/> Contributor address; City; State; Zip Code Copperas Cove, TX 76522	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) college instructor		Employer (See Instructions) Central Texas College
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Linda <hr/> Contributor address; City; State; Zip Code St. Louis, MO 63141	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Stevan <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76903-8643	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitehead, Lauren <hr/> Contributor address; City; State; Zip Code Houston, TX 77009	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Interior Design		Employer (See Instructions) Lauren Whitehead

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 76/78 Rpt: 79/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 07/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Elizabeth	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Alamogordo, NM 88310		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Mary	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Balch Springs, TX 75180		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wong, Tyler	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Forest Park, IL 60130		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Raleigh	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code San Antonio, TX 78212		
Principal occupation / Job title (See Instructions) Forensic Psychologist		Employer (See Instructions) Self-employed
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodard, Susan	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code College Station, TX 77845		
Principal occupation / Job title (See Instructions) Senior Lecturer		Employer (See Instructions) Texas A&M University

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 77/78 Rpt: 80/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 07/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wooten, Tim	7 Amount of Contribution (\$) \$8.34
6 Contributor address; City; State; Zip Code Round Mountain, TX 78663		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Wyatt	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code San Antonio, TX 78201		
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) Wayne Wright LLP
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yamashiro, Donna	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Torrance, CA 90503		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yates, Nancy A	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Hamilton, TX 76531		
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) self
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zakes, Joe	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Austin, TX 78749		
Principal occupation / Job title (See Instructions) contractor		Employer (See Instructions) Almost Perfect Construction

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 78/78 Rpt: 81/93
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851
4 Date 09/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zivley, Bruce <hr/> 6 Contributor address; City; State; Zip Code Wimberley, TX 78676-5138	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/2 Rpt: 82/93	
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 08/05/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lone Star Project	8 Amount of contribution (\$) \$7,500.00	9 In-kind contribution description Research
7 Contributor address; City; State; Zip Code Washington, DC 20003		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Medina, Manuel	Amount of contribution (\$) \$1,000.00	In-kind contribution description Campaign Signs
Contributor address; City; State; Zip Code San Antonio, TX 78257		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Legislative Aide		Employer (FOR NON-JUDICIAL) (See instructions) State of Texas	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Medina, Manuel	Amount of contribution (\$) \$1,000.00	In-kind contribution description Campaign Signs
Contributor address; City; State; Zip Code San Antonio, TX 78257		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Legislative Aide		Employer (FOR NON-JUDICIAL) (See instructions) State of Texas	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 2/2 Rpt: 83/93	
2 FILER NAME Castellano, Cecilia (Mrs.)		3 Filer ID (Ethics Commission Filers) 00087851	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 08/14/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Medina, Manuel	8 Amount of contribution (\$) \$1,763.00	9 In-kind contribution description Campaign Signs
	7 Contributor address; City; State; Zip Code San Antonio, TX 78257	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Legislative Aide		11 Employer (FOR NON-JUDICIAL) (See instructions) State of Texas	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 07/30/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00853010</u>) The First Ask	Amount of contribution (\$) \$1,240.48	In-kind contribution description Staff Time
	Contributor address; City; State; Zip Code Washington, DC 20003	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 08/31/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00853010</u>) The First Ask	Amount of contribution (\$) \$868.33	In-kind contribution description Staff Time
	Contributor address; City; State; Zip Code Washington, DC 20003	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/10 Rpt: 84/93	2 FILER NAME Castellano, Cecilia (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087851
4 Date 09/03/2024	5 Payee name 3-D Signs	
6 Amount (\$) \$537.44	7 Payee address; City; State; Zip Code 7986 1st Street Somerset, TX 78069	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Literature
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/11/2024	Payee name 3-D Signs	
Amount (\$) \$12,286.38	Payee address; City; State; Zip Code 7986 1st Street Somerset, TX 78069	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Literature
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/31/2024	Payee name 7 Eleven	
Amount (\$) \$3.24	Payee address; City; State; Zip Code 19525 McDodald St Lytle, TX 78052	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ice
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/10 Rpt: 85/93	2 FILER NAME Castellano, Cecilia (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/31/2024	5 Payee name 7 Eleven	
6 Amount (\$) \$48.84	7 Payee address; City; State; Zip Code 19525 McDodald St Lytle, TX 78052	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/05/2024	Payee name 7-Eleven	
Amount (\$) \$49.20	Payee address; City; State; Zip Code 19489 Somerset Rd Somerset, TX 78069	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/08/2024	Payee name 7-Eleven	
Amount (\$) \$7.17	Payee address; City; State; Zip Code 19525 McDonald St. Lytle, TX 78052	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refreshments
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/10 Rpt: 86/93	2 FILER NAME Castellano, Cecilia (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087851
4 Date 09/08/2024	5 Payee name 7-Eleven	
6 Amount (\$) \$68.57	7 Payee address; City; State; Zip Code 19525 McDonald St Lytle, TX 78052	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/17/2024	Payee name 7-Eleven	
Amount (\$) \$61.28	Payee address; City; State; Zip Code 19849 Somerset Rd. Somerset, TX 78069	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/19/2024	Payee name 7-Eleven	
Amount (\$) \$56.98	Payee address; City; State; Zip Code 19525 McDonald St. Lytle, TX 78052	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/10 Rpt: 87/93	2 FILER NAME Castellano, Cecilia (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087851
4 Date 09/04/2024	5 Payee name Ayala, Ana	
6 Amount (\$) \$790.12	7 Payee address; City; State; Zip Code 525 E County Rd 5719 Natalia, TX 78059	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/17/2024	Payee name Boyd Rojas Ad Agency	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 3603 Fredericksburg Rd. San Antonio, TX 78201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Tech Support
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/26/2024	Payee name Boyd Rojas Ad Agency	
Amount (\$) \$150.00	Payee address; City; State; Zip Code 3603 Federickburg Rd Ste. 134 San Antonio, TX 78201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/10 Rpt: 88/93	2 FILER NAME Castellano, Cecilia (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087851
4 Date 09/15/2024	5 Payee name DownTown S.A	
6 Amount (\$) \$20.00	7 Payee address; City; State; Zip Code 414 Dolorosa San Antonio, TX 78205	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/30/2024	Payee name Fiesta at North Star	
Amount (\$) \$56.91	Payee address; City; State; Zip Code 102 W. Rector St. San Antonio, TX 78216	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Decorations
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/12/2024	Payee name Flash Valet	
Amount (\$) \$51.37	Payee address; City; State; Zip Code 600 E. Market St. San Antonio, TX 78205	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/10 Rpt: 89/93	2 FILER NAME Castellano, Cecilia (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087851
4 Date 07/04/2024	5 Payee name Frio Self Serve	
6 Amount (\$) \$2.05	7 Payee address; City; State; Zip Code IH 35 & HWY 85 Dilley, TX 78017	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refreshments
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/04/2024	Payee name Frio Self Serve	
Amount (\$) \$50.39	Payee address; City; State; Zip Code IH 35 & HWY 85 Dilley, TX 78017	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/29/2024	Payee name Frio Self Serve	
Amount (\$) \$17.15	Payee address; City; State; Zip Code IH 35 & Hwy 85 Dilley, TX 78017	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refreshments
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/10 Rpt: 90/93	2 FILER NAME Castellano, Cecilia (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087851
4 Date 07/25/2024	5 Payee name JLB Restaurant	
6 Amount (\$) \$300.00	7 Payee address; City; State; Zip Code 938 Loma Grande Crystal City, TX 78839	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/10/2024	Payee name McDonald's	
Amount (\$) \$27.21	Payee address; City; State; Zip Code 1009 East Hondo St Devine, TX 78016	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/04/2024	Payee name PIZZA HUT	
Amount (\$) \$138.24	Payee address; City; State; Zip Code 201 Pena St. Carrizo Springs, TX 78834	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/10 Rpt: 91/93	2 FILER NAME Castellano, Cecilia (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087851
4 Date 09/10/2024	5 Payee name Pilot	
6 Amount (\$) \$68.34	7 Payee address; City; State; Zip Code 709 US HWY 77 N Schulenberg, TX 78956	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/09/2024	Payee name Professional Campaign Services	
Amount (\$) \$3,000.00	Payee address; City; State; Zip Code 5 Turin Ct San Antonio, TX 78257	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Voter Contact
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/29/2024	Payee name Red Lobster	
Amount (\$) \$109.14	Payee address; City; State; Zip Code 5315 San Dario Ave Lardo, TX 78041	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/10 Rpt: 92/93	2 FILER NAME Castellano, Cecilia (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087851
4 Date 08/30/2024	5 Payee name Sam's Club	
6 Amount (\$) \$69.40	7 Payee address; City; State; Zip Code 5565 De Zavala San Antonio, TX 78249	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/09/2024	Payee name Shell	
Amount (\$) \$17.27	Payee address; City; State; Zip Code 2215 Highway 71 S Columbus, TX 78934	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refreshments
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/09/2024	Payee name Shell	
Amount (\$) \$4.87	Payee address; City; State; Zip Code 2215 Highway 71 S Columbus, TX 78934	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refreshments
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/10 Rpt: 93/93	2 FILER NAME Castellano, Cecilia (Mrs.)	3 Filer ID (Ethics Commission Filers) 00087851
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4 Date 09/08/2024	5 Payee name Whataburger
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6 Amount (\$) \$24.16	7 Payee address; City; State; Zip Code 2111 E. Main St. Uvalde, TX 78802
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/19/2024	Payee name Yolie's Restaurant
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Amount (\$) \$422.61	Payee address; City; State; Zip Code 15111 N HWY 83 Crystal City, TX 78839
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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