

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00086561	2 Total pages filed: 792
3 COMMITTEE NAME Mothers Against Greg Abbott			OFFICE USE ONLY Date Received ELECTRONICALLY FILED 10/07/2024 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 27881 Austin, TX 78755		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Nancy NICKNAME LAST SUFFIX Thompson		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE PO Box 27881 Austin, TX 78755		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 27881 Austin, TX 78755		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 567-7790		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff		
10 PERIOD COVERED	Month Day Year 07/01/2024 THROUGH Month Day Year 09/30/2024		
11 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	

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Mothers Against Greg Abbott	13 Filer ID (Ethics Commission Filers) 00086561
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 116,869.34
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 89,224.17
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 74,054.52
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 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.

Nancy Thompson

Signature of Campaign Treasurer

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

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
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17 COMMITTEE NAME Mothers Against Greg Abbott		18 Filer ID (Ethics Commission Filers) 00086561
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 116,869.34
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 89,224.17
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<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: 1/692 Rpt: 4/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A Fox, Michelle <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78750	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abramson, Helaine <hr/> Contributor address; City; State; Zip Code Houston, TX 77070	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abramson, Nancy <hr/> Contributor address; City; State; Zip Code Bellaire, TX 77401	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abrego, Carissa <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Community Engagement Consultant		Employer (See Instructions) Private Firm
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abrego, Carissa <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Community Engagement Consultant		Employer (See Instructions) Private Firm

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/692 Rpt: 5/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acord, Kent 6 Contributor address; City; State; Zip Code New Braunfels, TX 78132	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acord, Kent Contributor address; City; State; Zip Code New Braunfels, TX 78132	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acord, Kent Contributor address; City; State; Zip Code New Braunfels, TX 78132	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acord, Kent Contributor address; City; State; Zip Code New Braunfels, TX 78132	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Don Contributor address; City; State; Zip Code Horseshoe Bay, TX 78657	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/692 Rpt: 6/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adcock, Rebecca <hr/> 6 Contributor address; City; State; Zip Code Pearland, TX 77581	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aden, Marilyn <hr/> Contributor address; City; State; Zip Code New Braunfels, TX 78130	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aden, Marilyn <hr/> Contributor address; City; State; Zip Code New Braunfels, TX 78130	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aden, Marilyn <hr/> Contributor address; City; State; Zip Code New Braunfels, TX 78130	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aden, Marilyn <hr/> Contributor address; City; State; Zip Code New Braunfels, TX 78130	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/692 Rpt: 7/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aden, Marilyn <hr/> 6 Contributor address; City; State; Zip Code New Braunfels, TX 78130	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aguilera, Jessica <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$51.55
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aguirre, Marsha <hr/> Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aguirre, Marsha <hr/> Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aguirre, Marsha <hr/> Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/692 Rpt: 8/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aguirre, Sarah 6 Contributor address; City; State; Zip Code San Antonio, TX 78230	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Northside Isd
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahlgren, Carol Contributor address; City; State; Zip Code Round Rock, TX 78665	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahlgren, Carol Contributor address; City; State; Zip Code Round Rock, TX 78665	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahmad, Subia Contributor address; City; State; Zip Code Frisco, TX 75034	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahmad, Subia Contributor address; City; State; Zip Code Frisco, TX 75034	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/692 Rpt: 9/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahmad, Subia <hr/> 6 Contributor address; City; State; Zip Code Frisco, TX 75034	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aitken, Kenneth <hr/> Contributor address; City; State; Zip Code Winchester, KY 40391	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albrecht, Hanah <hr/> Contributor address; City; State; Zip Code Dallas, TX 75218	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aldana, Erma <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78229	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Ermabuyshouses
Date 08/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aldrich, Lynne <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77381-4140	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/692 Rpt: 10/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aldrich, Lynne 6 Contributor address; City; State; Zip Code The Woodlands, TX 77381	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Kimberly Contributor address; City; State; Zip Code Brookshire, TX 77423	Amount of Contribution (\$) \$97.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Kimberly Contributor address; City; State; Zip Code Brookshire, TX 77423	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Labor Management Specialist		Employer (See Instructions) Sunrise Senior Living
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Kimberly Contributor address; City; State; Zip Code Brookshire, TX 77423	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Labor Management Specialist		Employer (See Instructions) Sunrise Senior Living
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Kimberly Contributor address; City; State; Zip Code Brookshire, TX 77423	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Labor Management Specialist		Employer (See Instructions) Sunrise Senior Living

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/692 Rpt: 11/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alford, Barbara <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77008	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alford, Barbara <hr/> Contributor address; City; State; Zip Code Houston, TX 77008	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alford, Barbara <hr/> Contributor address; City; State; Zip Code Houston, TX 77008	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allard, John <hr/> Contributor address; City; State; Zip Code Rockville, MD 20850-3064	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Abc/Walt Disney Co.
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alldredge, Nicole <hr/> Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Public Engagement		Employer (See Instructions) Hntb

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/692 Rpt: 12/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alldredge, Nicole <hr/> 6 Contributor address; City; State; Zip Code Frisco, TX 75035	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Public Engagement And Communications Specialist		9 Employer (See Instructions) Hntb Corp.
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alldredge, Nicole <hr/> Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Public Engagement And Communications Specialist		Employer (See Instructions) Hntb Corp.
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alldredge, Nicole <hr/> Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Public Engagement And Communications Specialist		Employer (See Instructions) Hntb Corp.
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allison, Michael <hr/> Contributor address; City; State; Zip Code Oakland, CA 94618	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allison, Michael <hr/> Contributor address; City; State; Zip Code Oakland, CA 94618	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/692 Rpt: 13/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Almassi, Carol <hr/> 6 Contributor address; City; State; Zip Code Allen, TX 75013	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Almassi, Carol <hr/> Contributor address; City; State; Zip Code Allen, TX 75013	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Almoney, Amanda <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alperin, Lorena <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alrord, Emily <hr/> Contributor address; City; State; Zip Code Anacortes, WA 98221	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/692 Rpt: 14/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alrord, Emily <hr/> 6 Contributor address; City; State; Zip Code Anacortes, WA 98221	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alrord, Emily <hr/> Contributor address; City; State; Zip Code Anacortes, WA 98221	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alsup, Maureen <hr/> Contributor address; City; State; Zip Code Bellaire, TX 77401	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alvarado, Carlos <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78215	Amount of Contribution (\$) \$14.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alvarado, Nancy G <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78240	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Dispatch		Employer (See Instructions) Mastec

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/692 Rpt: 15/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alvarez, Lorena <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78230	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Nurse		9 Employer (See Instructions) Christus Health
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alvarez, Lorena <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78230	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Christus Health
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alvarez, Lorena <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78230	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Christus Health
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alvarez, Susan <hr/> Contributor address; City; State; Zip Code Dallas, TX 75211-1843	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Environmental Director		Employer (See Instructions) North Central Texas Council Of Governments
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alvoid, Lee <hr/> Contributor address; City; State; Zip Code Dallas, TX 75234	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/692 Rpt: 16/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alvoid, Lee 6 Contributor address; City; State; Zip Code Dallas, TX 75234	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alvoid, Lee Contributor address; City; State; Zip Code Dallas, TX 75234	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amanda, Rizzo Contributor address; City; State; Zip Code San Antonio, TX 78247-2734	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Banker		Employer (See Instructions) Broadway Bank
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ameduri, Maria Contributor address; City; State; Zip Code San Antonio, TX 78209-8305	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ameduri, Maria Contributor address; City; State; Zip Code San Antonio, TX 78209-8305	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/692 Rpt: 17/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ameduri, Maria <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78209-8305	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ameduri, Maria <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209-8305	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Stacy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-Employed
Date 07/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Stephanie <hr/> Contributor address; City; State; Zip Code Clute, TX 77531	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Sue A <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/692 Rpt: 18/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Sue A <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78759	7 Amount of Contribution (\$) \$202.40
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Sue A <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrade, Sally <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78232-3424	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrade, Sally <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78232	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrade, Sally <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78232-3424	Amount of Contribution (\$) \$84.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/692 Rpt: 19/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrade-Ornelas, Veronica <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78232	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrew, Mary <hr/> Contributor address; City; State; Zip Code Houston, TX 77008	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews, Prentiss & Francey <hr/> Contributor address; City; State; Zip Code Denton, TX 76209	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews, Prentiss & Francey <hr/> Contributor address; City; State; Zip Code Denton, TX 76209	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ankney, Christine <hr/> Contributor address; City; State; Zip Code Bellaire, TX 77401	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/692 Rpt: 20/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Annis, Marianne <hr/> 6 Contributor address; City; State; Zip Code Spring, TX 77389	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Annis, Marianne <hr/> Contributor address; City; State; Zip Code Spring, TX 77389	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Annis, Marianne <hr/> Contributor address; City; State; Zip Code Spring, TX 77389	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Annis, Marianne <hr/> Contributor address; City; State; Zip Code Spring, TX 77389	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Annis, Marianne <hr/> Contributor address; City; State; Zip Code Spring, TX 77389	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/692 Rpt: 21/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Antwine, Kristine 6 Contributor address; City; State; Zip Code Las Cruces, NM 88001	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Antwine, Kristine Contributor address; City; State; Zip Code Las Cruces, NM 88001	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Antwine, Kristine Contributor address; City; State; Zip Code Las Cruces, NM 88001	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anzalotta, Lea Contributor address; City; State; Zip Code Bulverde, TX 78163	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Landscape Design		Employer (See Instructions) Self-Employed
Date 07/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Apted, Janis 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) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/692 Rpt: 22/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Apted, Janis <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77057	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Apted, Janis <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) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arawn, Heather <hr/> Contributor address; City; State; Zip Code Magnolia, TX 77354-1554	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Klein Isd
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Archer, Amy <hr/> Contributor address; City; State; Zip Code Frisco, TX 75033	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Conifer Health Solutions
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Archer, Amy <hr/> Contributor address; City; State; Zip Code Frisco, TX 75033	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Conifer Health Solutions

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/692 Rpt: 23/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Archer, Amy <hr/> 6 Contributor address; City; State; Zip Code Frisco, TX 75033	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Director		9 Employer (See Instructions) Conifer Health Solutions
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Archibald, Kyli <hr/> Contributor address; City; State; Zip Code Houston, TX 77015	Amount of Contribution (\$) \$54.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arellano, Jacquelyn <hr/> Contributor address; City; State; Zip Code Castroville, TX 78009	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Investigator		Employer (See Instructions) Dfps
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arellano, Jacquelyn <hr/> Contributor address; City; State; Zip Code Castroville, TX 78009	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Investigator		Employer (See Instructions) Dfps
Date 09/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arellano, Jacquelyn <hr/> Contributor address; City; State; Zip Code Castroville, TX 78009	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Investigator		Employer (See Instructions) Dfps

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/692 Rpt: 24/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arenal, Stephanie <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78230	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arenas, Andragale <hr/> Contributor address; City; State; Zip Code St. Augustine, FL 32092	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arenas, Andragale <hr/> Contributor address; City; State; Zip Code St. Augustine, FL 32092	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arenas, Andragale <hr/> Contributor address; City; State; Zip Code St. Augustine, FL 32092	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armstrong, Dianne <hr/> Contributor address; City; State; Zip Code Dallas, TX 75208	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Human Resources		Employer (See Instructions) Neiman Marcus Group

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/692 Rpt: 25/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armstrong, Pandora <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78258	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Grocery		9 Employer (See Instructions) Trader Joe'S
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arredondo, Dulcinea <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Substitute Teacher		Employer (See Instructions) Austin Isd
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arrington, Caryn <hr/> Contributor address; City; State; Zip Code Spring, TX 77373	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Self-Employed
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arrington, Caryn <hr/> Contributor address; City; State; Zip Code Spring, TX 77373	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Self-Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arrowsmith, Marie <hr/> Contributor address; City; State; Zip Code Dallas, TX 75218	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Research Analyst		Employer (See Instructions) Sandia Labs

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SCHEDULE A1

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arrowsmith, Marie <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75218	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Research Analyst		9 Employer (See Instructions) Sandia Labs
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arrowsmith, Marie <hr/> Contributor address; City; State; Zip Code Dallas, TX 75218	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Research Analyst		Employer (See Instructions) Sandia Labs
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ashby, Charmon <hr/> Contributor address; City; State; Zip Code San Jose, CA 95148	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ashcraft, Jan <hr/> Contributor address; City; State; Zip Code Cibolo, TX 78108	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ashcraft, Jan <hr/> Contributor address; City; State; Zip Code Cibolo, TX 78108	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/692 Rpt: 27/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ashcraft, Jan <hr/> 6 Contributor address; City; State; Zip Code Cibolo, TX 78108	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ashcraft, Jan <hr/> Contributor address; City; State; Zip Code Cibolo, TX 78108	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Asher, Elizabeth <hr/> Contributor address; City; State; Zip Code Houston, TX 77077	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Askew, Michelle <hr/> Contributor address; City; State; Zip Code Stockton, CA 95205	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Athene, Susan <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78204	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Grant Writer		Employer (See Instructions) Trinity University

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/692 Rpt: 28/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atkinson, Marjorie 6 Contributor address; City; State; Zip Code Garland, TX 75042	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Education Consultant		9 Employer (See Instructions) Ask Marj
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atkinson, Marjorie Contributor address; City; State; Zip Code Garland, TX 75042	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Education Consultant		Employer (See Instructions) Ask Marj
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atkinson, Marjorie Contributor address; City; State; Zip Code Garland, TX 75042	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Education Consultant		Employer (See Instructions) Ask Marj
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Avey, Melinda Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Avey, Melinda Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/692 Rpt: 29/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Avey, Melinda 6 Contributor address; City; State; Zip Code Round Rock, TX 78664	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Avey, Melinda Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayers, Susan Contributor address; City; State; Zip Code Tomball, TX 77377	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayers, Susan Contributor address; City; State; Zip Code Tomball, TX 77377	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayers, Susan Contributor address; City; State; Zip Code Tomball, TX 77377	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/692 Rpt: 30/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayers, Susan <hr/> 6 Contributor address; City; State; Zip Code Tomball, TX 77377	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bagley, Ann <hr/> Contributor address; City; State; Zip Code Dallas, TX 75228	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) City Planning Consultant		Employer (See Instructions) Self-Employed
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bagley, Ann <hr/> Contributor address; City; State; Zip Code Dallas, TX 75228	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self-Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bagley, Ann <hr/> Contributor address; City; State; Zip Code Dallas, TX 75228	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Planner		Employer (See Instructions) Self-Employed
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bahena, Mayra <hr/> Contributor address; City; State; Zip Code Dallas, TX 75228	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/692 Rpt: 31/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bahmueller, Carol <hr/> 6 Contributor address; City; State; Zip Code Saint Louis, MO 63126	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Charles <hr/> Contributor address; City; State; Zip Code Austin, TX 78735	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Linda <hr/> Contributor address; City; State; Zip Code Austin, TX 78730-3355	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Stephen <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78240	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Material Handler		Employer (See Instructions) 3M
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Stephen <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78240	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Material Handler		Employer (See Instructions) 3M

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/692 Rpt: 32/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Stephen <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78240	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Material Handler		9 Employer (See Instructions) 3M
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Becky <hr/> Contributor address; City; State; Zip Code Durango, CO 81301	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Product Designer		Employer (See Instructions) Self-Employed
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78726	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Shawn <hr/> Contributor address; City; State; Zip Code Denton, TX 76209-1366	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Audio Producer		Employer (See Instructions) Self-Employed
Date 07/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balcombe, April <hr/> Contributor address; City; State; Zip Code Austin, TX 78737	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Court Reporter		Employer (See Instructions) Echo Connection

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/692 Rpt: 33/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balcombe, April <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78737	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) Court Reporter		9 Employer (See Instructions) Echo Connection
Date 09/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balcombe, April <hr/> Contributor address; City; State; Zip Code Austin, TX 78737	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Court Reporter		Employer (See Instructions) Echo Connection
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balsman, Melissa <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barber, Summer <hr/> Contributor address; City; State; Zip Code Leander, TX 78641	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barbier, Rebecca <hr/> Contributor address; City; State; Zip Code Houston, TX 77043	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Operations Director		Employer (See Instructions) Aecom

MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/692 Rpt: 34/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barclay, Emily <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78739	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Seo		9 Employer (See Instructions) Inbound Google Ads Agency
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barfoot, Janine <hr/> Contributor address; City; State; Zip Code Dickinson, TX 77539	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barfoot, Janine <hr/> Contributor address; City; State; Zip Code Dickinson, TX 77539	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Business Professional		Employer (See Instructions) Aerospace Corp
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barker, Lois <hr/> Contributor address; City; State; Zip Code Houston, TX 77043-4523	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barlow, Leslie <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/692 Rpt: 35/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnert, Tony 6 Contributor address; City; State; Zip Code Calabasas, CA 91302	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnes, Susan Contributor address; City; State; Zip Code Newport, RI 02840	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnes, Susan Contributor address; City; State; Zip Code Newport, RI 02840	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnett, Alicia Contributor address; City; State; Zip Code Granbury, TX 76049	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnett, Cindy Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/692 Rpt: 36/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnett, Doug <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78717	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) University If Texas
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnhart, Vicki <hr/> Contributor address; City; State; Zip Code Galveston, TX 77551	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnhart, Vicki <hr/> Contributor address; City; State; Zip Code Galveston, TX 77551	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnhart, Vicki <hr/> Contributor address; City; State; Zip Code Galveston, TX 77551	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barohn, Nancy <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78210	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-Employed

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barohn, Nancy 6 Contributor address; City; State; Zip Code San Antonio, TX 78210	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self-Employed
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barohn, Nancy Contributor address; City; State; Zip Code San Antonio, TX 78210	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barr, Vanessa Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Dell Children'S Medical Center
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barr, Vanessa Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Dell Children'S Medical Center
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barr, Vanessa Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Dell Children'S Medical Center

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/692 Rpt: 38/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barran, Michelle <hr/> 6 Contributor address; City; State; Zip Code Round Rock, TX 78664	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Na
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barras, Donna <hr/> Contributor address; City; State; Zip Code Smithville, TX 78957	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barras, Donna <hr/> Contributor address; City; State; Zip Code Smithville, TX 78957	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrett, Tamsen <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Norton Rose Fulbright
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrett, Tamsen <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Norton Rose Fulbright

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/692 Rpt: 39/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrett, Tamsen <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78759	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Norton Rose Fulbright
Date 07/31/2024	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 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barshop, Rosemary <hr/> Contributor address; City; State; Zip Code Rockwall, TX 75087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barshop, Rosemary <hr/> Contributor address; City; State; Zip Code Rockwall, TX 75087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barton, Carol <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) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/692 Rpt: 40/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barton, Carol <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78247	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barton, Carol <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) N/A
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bateman, Bob <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bates, Sally <hr/> Contributor address; City; State; Zip Code Houston, TX 77087	Amount of Contribution (\$) \$38.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bates, Sally <hr/> Contributor address; City; State; Zip Code Houston, TX 77087	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/692 Rpt: 41/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bauer, Susan <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77059	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baugh, Tina <hr/> Contributor address; City; State; Zip Code Benbrook, TX 76126	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baumgardner, Robert <hr/> Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baumgardner, Robert <hr/> Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baumgardner, Robert <hr/> Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/692 Rpt: 42/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baxt, Virginia <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77007	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baxter, Michele <hr/> Contributor address; City; State; Zip Code Keller, TX 76244	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bazdresch, Martha <hr/> Contributor address; City; State; Zip Code El Paso, TX 79925	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bean, Marie <hr/> Contributor address; City; State; Zip Code Euless, TX 76040	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Dental Hygienist		Employer (See Instructions) Gentle Dentistry Of Las Colinas
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bean, Marie <hr/> Contributor address; City; State; Zip Code Euless, TX 76040	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Dental Hygienist		Employer (See Instructions) Gentle Dentistry Of Las Colinas

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/692 Rpt: 43/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beard, Martha <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78757	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Tlsc
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beard, Michele <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77479-6364	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) Lamar Cisd
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bearrow, Emily <hr/> Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$43.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beaudry, Kathleen <hr/> Contributor address; City; State; Zip Code Manvel, TX 77578	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beaudry, Kathleen <hr/> Contributor address; City; State; Zip Code Manvel, TX 77578	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/692 Rpt: 44/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beaudry, Kathleen 6 Contributor address; City; State; Zip Code Manvel, TX 77578	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beaver, Michaelan Contributor address; City; State; Zip Code Fort Worth, TX 76110-3236	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beavers, Judi Contributor address; City; State; Zip Code Paradise, TX 76073	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beavers, Judi Contributor address; City; State; Zip Code Paradise, TX 76073	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beck, Coleen Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/692 Rpt: 45/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beck, Debra And Robert <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78758	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beck, Debra And Robert <hr/> Contributor address; City; State; Zip Code Austin, TX 78758	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beck, Joyce L. <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76123	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Instructor		Employer (See Instructions) Tcu Extended Education
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Jane <hr/> Contributor address; City; State; Zip Code Midland, TX 79703	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beckett, Karen <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75007	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/692 Rpt: 46/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bedwell, Maria <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77007	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Stylist		9 Employer (See Instructions) Self-Employed
Date 07/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beeler, Karen <hr/> Contributor address; City; State; Zip Code Houston, TX 77063	Amount of Contribution (\$) \$66.89
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beeler, Karen <hr/> Contributor address; City; State; Zip Code Houston, TX 77063	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Fti
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belile, Elisabeth <hr/> Contributor address; City; State; Zip Code Austin, TX 78724	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Meta
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belile, Elisabeth <hr/> Contributor address; City; State; Zip Code Austin, TX 78724	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Meta

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/692 Rpt: 47/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Sarah <hr/> 6 Contributor address; City; State; Zip Code McKinney, TX 75071	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Sarah <hr/> Contributor address; City; State; Zip Code McKinney, TX 75071	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Sarah <hr/> Contributor address; City; State; Zip Code McKinney, TX 75071	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Marie <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78216	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benson, Ally <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/692 Rpt: 48/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benson, Simeon <hr/> 6 Contributor address; City; State; Zip Code Arlington, TX 76013	7 Amount of Contribution (\$) \$17.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergen, Kay <hr/> Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergen, Kay <hr/> Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berger, Robert <hr/> Contributor address; City; State; Zip Code Maitland, FL 32751	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergman, Eldo <hr/> Contributor address; City; State; Zip Code Houston, TX 77035	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/692 Rpt: 49/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergman, Eldo <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77035	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 09/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergman, Eldo <hr/> Contributor address; City; State; Zip Code Houston, TX 77035	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 07/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berliner, Sharon <hr/> Contributor address; City; State; Zip Code Houston, TX 77068	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berliner, Sharon <hr/> Contributor address; City; State; Zip Code Houston, TX 77068	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berliner, Sharon <hr/> Contributor address; City; State; Zip Code Houston, TX 77068	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/692 Rpt: 50/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berliner, Sharon <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77068	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berry, Kathy <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berry, Kathy <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berry, Michael <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berzanski, Maureen <hr/> Contributor address; City; State; Zip Code Mundelein, IL 60060	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/692 Rpt: 51/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Besson, Jonathan <hr/> 6 Contributor address; City; State; Zip Code Pittsburg, CA 94565-7926	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) It Consultant		9 Employer (See Instructions) Oracle Usa
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Besson, Jonathan <hr/> Contributor address; City; State; Zip Code Pittsburg, CA 94565-7926	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) It Consultant		Employer (See Instructions) Oracle Usa
Date 07/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bethel, Marnie <hr/> Contributor address; City; State; Zip Code Hunt, TX 78024	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bethel, Marnie <hr/> Contributor address; City; State; Zip Code Hunt, TX 78024	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bethel, Marnie <hr/> Contributor address; City; State; Zip Code Hunt, TX 78024	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/692 Rpt: 52/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bevier, Susan <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78705	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Educator		9 Employer (See Instructions) Odyssey School
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bevier, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78705	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Odyssey School
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bevier, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78705	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Odyssey School
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beyer, Brett <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bibeau, Sharon <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/692 Rpt: 53/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bibeau, Sharon 6 Contributor address; City; State; Zip Code Lakeway, TX 78734	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bibeau, Sharon Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bibeau, Sharon Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bibeau, Sharon Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bibeau, Sharon Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/692 Rpt: 54/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bibry-Moya, Angela <hr/> 6 Contributor address; City; State; Zip Code Highland Village, TX 75077	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bireta, Jane <hr/> Contributor address; City; State; Zip Code Lawrence, KS 66044-9460	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Birk, Joy <hr/> Contributor address; City; State; Zip Code Angleton, TX 77515	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Birk, Joy <hr/> Contributor address; City; State; Zip Code Angleton, TX 77515	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Birk, Joy <hr/> Contributor address; City; State; Zip Code Angleton, TX 77515	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/692 Rpt: 55/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Birrell, Bruce <hr/> 6 Contributor address; City; State; Zip Code Eugene, OR 97401	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bishop, Donna <hr/> Contributor address; City; State; Zip Code Smithville, TX 78957	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bixby, Melissa <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Hr Consultant		Employer (See Instructions) Red Shoe Consulting
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bixby, Melissa <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Hr Consultant		Employer (See Instructions) Red Shoe Consulting
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bixby, Melissa <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Hr Consultant		Employer (See Instructions) Red Shoe Consulting

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/692 Rpt: 56/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Black, Mary <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78756	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Black, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Black, Mary <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Black, Patti <hr/> Contributor address; City; State; Zip Code Austin, TX 79749	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Black, Patti <hr/> Contributor address; City; State; Zip Code Austin, TX 79749	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/692 Rpt: 57/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Black, Patti <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 79749	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackmon, Faye <hr/> Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackmon, Faye <hr/> Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackmon, Faye <hr/> Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackmon, Frances Faye <hr/> Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/692 Rpt: 58/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackmon, Frances Faye <hr/> 6 Contributor address; City; State; Zip Code Irving, TX 75062	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackmon, Frances Faye <hr/> Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackwell, Marysue <hr/> Contributor address; City; State; Zip Code Hudson Oaks, TX 76087	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blakeslee, Kathleen <hr/> Contributor address; City; State; Zip Code Houston, TX 77009	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Houston Independent School District
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bland-Ho, Heather <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 56/692 Rpt: 59/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blanton, Teresa 6 Contributor address; City; State; Zip Code Cedar Park, TX 78613	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blanton, Teresa Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blanton, Teresa Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Risd
Date 07/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blanton, Teresa Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Risd
Date 08/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blanton, Teresa Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Risd

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/692 Rpt: 60/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blanton, Teresa <hr/> 6 Contributor address; City; State; Zip Code Cedar Park, TX 78613	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Risd
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blanton, Teresa <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Risd
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blanton, Teresa <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Risd
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blessing, Lesley <hr/> Contributor address; City; State; Zip Code Austin, TX 78735	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self-Employed
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blessing, Lesley <hr/> Contributor address; City; State; Zip Code Austin, TX 78735	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self-Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 58/692 Rpt: 61/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blick, Suzanne 6 Contributor address; City; State; Zip Code Sioux Falls, SD 57104	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Truck Driver		9 Employer (See Instructions) Self-Employed
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bligh, Craig Contributor address; City; State; Zip Code Austin, TX 78733	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Pool Service Company		Employer (See Instructions) Self-Employed
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Block, Delores Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Exp Realty
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Block, Delores Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Exp Realty
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Block, Delores Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Exp Realty

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 59/692 Rpt: 62/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Block, Delores <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78731	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions) Exp Realty
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Block, Delores <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bloemker, Laura <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Web Content Writer Editor		Employer (See Instructions) Self-Employed
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bloomquist, Vonda <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bluntzer, Selena <hr/> Contributor address; City; State; Zip Code Schertz, TX 78154-2504	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) It Consultant		Employer (See Instructions) Catapult Solutions Group

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 60/692 Rpt: 63/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boehm, Jennifer <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77009	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bogart, Barbara <hr/> Contributor address; City; State; Zip Code Elgin, TX 78621	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Bastrop County
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bogart, Barbara <hr/> Contributor address; City; State; Zip Code Elgin, TX 78621	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Bastrop County
Date 08/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bogart, Barbara <hr/> Contributor address; City; State; Zip Code Elgin, TX 78621	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Bastrop County
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bogart, Barbara <hr/> Contributor address; City; State; Zip Code Elgin, TX 78621	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Bastrop County

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 61/692 Rpt: 64/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolan, Nancy <hr/> 6 Contributor address; City; State; Zip Code Mount Vernon, NY 10552	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Public Health		9 Employer (See Instructions) World Vision
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolan, Nancy <hr/> Contributor address; City; State; Zip Code Mount Vernon, NY 10552	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Public Health		Employer (See Instructions) World Vision
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolan, Nancy <hr/> Contributor address; City; State; Zip Code Mount Vernon, NY 10552	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Public Health		Employer (See Instructions) World Vision
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolstorff, Kathy <hr/> Contributor address; City; State; Zip Code Austin, TX 78722	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Physical Therapist		Employer (See Instructions) St David'S
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolstorff, Kathy <hr/> Contributor address; City; State; Zip Code Austin, TX 78722	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Physical Therapist		Employer (See Instructions) St David'S

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 62/692 Rpt: 65/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolstorff, Kathy <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78722	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Physical Therapist		9 Employer (See Instructions) St David'S
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolton, Debbie <hr/> Contributor address; City; State; Zip Code Palestine, TX 75801	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonadero, Erma <hr/> Contributor address; City; State; Zip Code Bellaire, TX 77401	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonowitz, Alan <hr/> Contributor address; City; State; Zip Code Huntington Beach, CA 92649	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Editor		Employer (See Instructions) Auto Club Of Southern California
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Booser, Helene <hr/> Contributor address; City; State; Zip Code Houston, TX 77005	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Borchert, Wendy 6 Contributor address; City; State; Zip Code Katy, TX 77494	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Learning Advisor		9 Employer (See Instructions) Chevron
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bord, Stefanie Contributor address; City; State; Zip Code Spring, TX 77379	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Borst, Gayle Contributor address; City; State; Zip Code Austin, TX 78721	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Stewardship Inc.
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bosch, Missy Contributor address; City; State; Zip Code Houston, TX 77009	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Notsuoh
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bosch, Missy Contributor address; City; State; Zip Code Houston, TX 77009	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Notsuoh

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bostick, Patricia <hr/> 6 Contributor address; City; State; Zip Code Ingleside, TX 78362	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Document Specialist		9 Employer (See Instructions) Norfleet Land
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boston, Lisa <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78216	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Local School District
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bostwick, Lynn <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) Ut Austin
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boswood, Janet <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boswood, Janet <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boudreault, Max <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78258	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Produce		9 Employer (See Instructions) H-E-B
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bouldin, Linda <hr/> Contributor address; City; State; Zip Code Manchester, NH 03103	Amount of Contribution (\$) \$21.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bouldin, Linda <hr/> Contributor address; City; State; Zip Code Manchester, NH 03103	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bovello, Kathy <hr/> Contributor address; City; State; Zip Code Chevy Chase, MD 20815	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Tax Acct		Employer (See Instructions) James Magno Cpa Llc
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bovello, Kathy <hr/> Contributor address; City; State; Zip Code Chevy Chase, MD 20815	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Tax Acct		Employer (See Instructions) James Magno Cpa Llc

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bovello, Kathy <hr/> 6 Contributor address; City; State; Zip Code Chevy Chase, MD 20815	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Tax Acct		9 Employer (See Instructions) James Magno Cpa Llc
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowen, Kelley <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$24.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowen, Kelley <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowers, Jaclyn <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78261	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowman, Kyra <hr/> Contributor address; City; State; Zip Code Hunt, TX 78024	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowman, Kyra <hr/> 6 Contributor address; City; State; Zip Code Hunt, TX 78024	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowman, Kyra <hr/> Contributor address; City; State; Zip Code Hunt, TX 78024	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Box, Jessi <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78212	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boxwell, Karen <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) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boxwell, Karen <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) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 68/692 Rpt: 71/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyd, Cathy <hr/> 6 Contributor address; City; State; Zip Code Friendswood, TX 77546	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyter, Holly <hr/> Contributor address; City; State; Zip Code Duncanville, TX 75137	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Claims Manager		Employer (See Instructions) Esi Healthcare Solutions
Date 07/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyter, Holly <hr/> Contributor address; City; State; Zip Code Duncanville, TX 75137	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Claims Processor		Employer (See Instructions) Esi Healthcare Solutions
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyter, Holly <hr/> Contributor address; City; State; Zip Code Duncanville, TX 75137	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Claims Processor		Employer (See Instructions) Esi Healthcare Solutions
Date 09/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyter, Holly <hr/> Contributor address; City; State; Zip Code Duncanville, TX 75137	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Claims Processor		Employer (See Instructions) Esi Healthcare Solutions

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 69/692 Rpt: 72/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bracegirdle, Amber <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78260	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Co-Founder		9 Employer (See Instructions) Mediavine Inc
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brackin, Melisa <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-Employed
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brackley, Margaret <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brady, Brenda <hr/> Contributor address; City; State; Zip Code Austin, TX 78749-3028	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brady, Keriann <hr/> Contributor address; City; State; Zip Code Murrieta, CA 92562	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Offices Of G John Jansen

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brandon, Janet <hr/> 6 Contributor address; City; State; Zip Code Texas City, TX 77590	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brandt, Donna <hr/> Contributor address; City; State; Zip Code Buda, TX 78610	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brannen, Debra <hr/> Contributor address; City; State; Zip Code Spring, TX 77382	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) Self-Employed
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brannen, Debra <hr/> Contributor address; City; State; Zip Code Spring, TX 77382	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) Self-Employed
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brannen, Debra <hr/> Contributor address; City; State; Zip Code Spring, TX 77382	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) Self-Employed

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brantley, Don <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77073	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Breaux, Sara <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Training And Development Manager		Employer (See Instructions) Ferrovial Agroman Us
Date 07/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Breed, Robin <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78626	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Breed, Robin <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Breed, Robin <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78626	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 72/692 Rpt: 75/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Breed, Robin <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78703	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Breed, Robin <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78626	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Breed, Robin <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Breining, Linda <hr/> Contributor address; City; State; Zip Code Austin, TX 78748-6551	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Texas State University
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brelo, Kaycie <hr/> Contributor address; City; State; Zip Code Allen, TX 75013	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Underwriter		Employer (See Instructions) Dual North America

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 73/692 Rpt: 76/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brelo, Kaycie <hr/> 6 Contributor address; City; State; Zip Code Allen, TX 75013	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Underwriter		9 Employer (See Instructions) Dual North America
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brenner, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) General Counsel		Employer (See Instructions) Credit Union Department
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brenner, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brenner, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brenner, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 74/692 Rpt: 77/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brewer, Jennifer <hr/> 6 Contributor address; City; State; Zip Code San Angelo, TX 76904	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Olfen Isd
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briggs, Susan <hr/> Contributor address; City; State; Zip Code Houston, TX 77090-2311	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briggs, Susan <hr/> Contributor address; City; State; Zip Code Houston, TX 77090	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Acct Exec Corp. Underwriting		Employer (See Instructions) Houston Public Media
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briggs, Susan <hr/> Contributor address; City; State; Zip Code Houston, TX 77090	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Acct Exec Corp. Underwriting		Employer (See Instructions) Houston Public Media
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brikowski, Diann <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 75/692 Rpt: 78/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Briscoe, Rebekah <hr/> 6 Contributor address; City; State; Zip Code Hewitt, TX 76643	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Student		9 Employer (See Instructions) Baylor
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brito, Marsha <hr/> Contributor address; City; State; Zip Code Dallas, TX 75208	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brito, Marsha <hr/> Contributor address; City; State; Zip Code Dallas, TX 75208	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brito, Marsha <hr/> Contributor address; City; State; Zip Code Dallas, TX 75208	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brizendine, Robin <hr/> Contributor address; City; State; Zip Code Lewisville, TX 75077	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 76/692 Rpt: 79/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brogden, William <hr/> 6 Contributor address; City; State; Zip Code Leander, TX 78641	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 08/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brogden, William <hr/> Contributor address; City; State; Zip Code Leander, TX 78641	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brogden, William <hr/> Contributor address; City; State; Zip Code Leander, TX 78641	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 07/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bronson, Joan <hr/> Contributor address; City; State; Zip Code Keller, TX 76244	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bronson, Joan <hr/> Contributor address; City; State; Zip Code Keller, TX 76244	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 77/692 Rpt: 80/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bronson, Joan <hr/> 6 Contributor address; City; State; Zip Code Keller, TX 76244	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brosnihan, Kerry <hr/> Contributor address; City; State; Zip Code Austin, TX 78738	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brosnihan, Kerry <hr/> Contributor address; City; State; Zip Code Austin, TX 78738	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brotman, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$36.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brower, Erika <hr/> Contributor address; City; State; Zip Code Long Beach, CA 90808	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) H-E-B

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 78/692 Rpt: 81/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brower, Erika <hr/> 6 Contributor address; City; State; Zip Code Long Beach, CA 90808	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Pharmacist		9 Employer (See Instructions) H-E-B
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Amber <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76133	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Graphic Designer		Employer (See Instructions) Self-Employed
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Bernadette <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Cheryl <hr/> Contributor address; City; State; Zip Code Del Valle, TX 78617	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Texas School For The Draf
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Randy <hr/> Contributor address; City; State; Zip Code Orlando, FL 32804-7122	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 79/692 Rpt: 82/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Randy <hr/> 6 Contributor address; City; State; Zip Code Orlando, FL 32804-7122	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Randy <hr/> Contributor address; City; State; Zip Code Orlando, FL 32804-7122	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Twanda <hr/> Contributor address; City; State; Zip Code Ingram, TX 78025	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Yvette <hr/> Contributor address; City; State; Zip Code Arlington, TX 76001	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Arlington Isd
Date 07/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruciaga, Geri <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 80/692 Rpt: 83/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruciaga, Geri <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78633	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Proposal Specialist		9 Employer (See Instructions) Sp+
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant, Karen <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78404	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) School Counselor		Employer (See Instructions) Ccisd
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant, Kiersten <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77498	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Conflicts Analyst		Employer (See Instructions) Baker Botts
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryce, April <hr/> Contributor address; City; State; Zip Code Austin, TX 78750	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Creative Director		Employer (See Instructions) Havas
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryce, April <hr/> Contributor address; City; State; Zip Code Austin, TX 78750	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Creative Director		Employer (See Instructions) Havas

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 81/692 Rpt: 84/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryce, April <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78750	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Creative Director		9 Employer (See Instructions) Havas
Date 07/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bucci, Jacki <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78218	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buchanan, Lillian <hr/> Contributor address; City; State; Zip Code Austin, TX 78702	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self-Employed
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buchanan, Lillian <hr/> Contributor address; City; State; Zip Code Austin, TX 78702	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self-Employed
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buchanan, Lillian <hr/> Contributor address; City; State; Zip Code Austin, TX 78702	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self-Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 82/692 Rpt: 85/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buchanan, Lillian <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78702	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Psychotherapist		9 Employer (See Instructions) Self-Employed
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buchanan, Lillian <hr/> Contributor address; City; State; Zip Code Austin, TX 78702	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self-Employed
Date 07/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bucy, Joy <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79407	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bucy, Joy <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79407	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bucy, Joy <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79407	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 83/692 Rpt: 86/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Budd-Poole, Tammie <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78247	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Budroni, Anne <hr/> Contributor address; City; State; Zip Code Austin, TX 78759-2406	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Budroni, Anne <hr/> Contributor address; City; State; Zip Code Austin, TX 78759-2406	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Budroni, Anne <hr/> Contributor address; City; State; Zip Code Austin, TX 78759-2406	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bulla, Nan <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 84/692 Rpt: 87/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bulla, Nanette <hr/> 6 Contributor address; City; State; Zip Code Round Rock, TX 78681-1213	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bulla, Nanette <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681-1213	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bullock, Kim <hr/> Contributor address; City; State; Zip Code Dallas, TX 75243	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Self-Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bullock, Kim <hr/> Contributor address; City; State; Zip Code Dallas, TX 75243	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Self-Employed
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bunnell, Virginia <hr/> Contributor address; City; State; Zip Code Bellingham, WA 98225	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 85/692 Rpt: 88/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bunnell, Virginia <hr/> 6 Contributor address; City; State; Zip Code Bellingham, WA 98225	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bunnell, Virginia <hr/> Contributor address; City; State; Zip Code Bellingham, WA 98225	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bunnell, Virginia <hr/> Contributor address; City; State; Zip Code Bellingham, WA 98225	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bunner, Melissa <hr/> Contributor address; City; State; Zip Code Austinaustin, TX 78731	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Anp
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burch, Debbie <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 86/692 Rpt: 89/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burchfiel, Phyllis <hr/> 6 Contributor address; City; State; Zip Code Spring, TX 77389	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burger, Rhonda <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78418	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burkett, Laura <hr/> Contributor address; City; State; Zip Code Belton, TX 76513	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burnham, Denisa <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burnham, Denisa <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 87/692 Rpt: 90/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burnham, Denisa <hr/> 6 Contributor address; City; State; Zip Code San Marcos, TX 78666	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burns, Mary <hr/> Contributor address; City; State; Zip Code Seattle, WA 98101	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burns, Pamela <hr/> Contributor address; City; State; Zip Code Lewisville, TX 75056	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burns, Pamela <hr/> Contributor address; City; State; Zip Code Lewisville, TX 75056	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Senior Communications Specialist		Employer (See Instructions) Bcs LLC
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bushor, Jennifer <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) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 88/692 Rpt: 91/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C., Sharon <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78752	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) State Of Texas
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C., Sharon <hr/> Contributor address; City; State; Zip Code Austin, TX 78752	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) State Of Texas
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C., Sharon <hr/> Contributor address; City; State; Zip Code Austin, TX 78752	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) State Of Texas
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caballero, Lucia <hr/> Contributor address; City; State; Zip Code Santa Ana, CA 92704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calaway, Krista <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 89/692 Rpt: 92/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calderon, Diana <hr/> 6 Contributor address; City; State; Zip Code Sarasota, FL 34239	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calderon, Diana <hr/> Contributor address; City; State; Zip Code Sarasota, FL 34239	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calderon, Diana <hr/> Contributor address; City; State; Zip Code Sarasota, FL 34239	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calderon, Diana <hr/> Contributor address; City; State; Zip Code Sarasota, FL 34239	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calderon, Diana <hr/> Contributor address; City; State; Zip Code Sarasota, FL 34239	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 90/692 Rpt: 93/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caldwell, Robin <hr/> 6 Contributor address; City; State; Zip Code The Woodlands, TX 77381	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calhoun, Kathleen <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calhoun, Kathleen <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calhoun, Kathleen <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Camacho, Jessica <hr/> Contributor address; City; State; Zip Code Mansfield, TX 76063	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Stay At Home Mom		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 91/692 Rpt: 94/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cameron, Liz <hr/> 6 Contributor address; City; State; Zip Code Denver, CO 80207	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Deborah <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Debra <hr/> Contributor address; City; State; Zip Code The Colony, TX 75056-3545	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Tech Support		Employer (See Instructions) Self-Employed
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Pamela F. <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76116	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campobasso, Carina <hr/> Contributor address; City; State; Zip Code Winthrop, MA 02152	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canahuati, Judy <hr/> 6 Contributor address; City; State; Zip Code Columbia, MD 21045	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Technical Advisor		9 Employer (See Instructions) Usaid
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canahuati, Judy <hr/> Contributor address; City; State; Zip Code Columbia, MD 21045	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Technical Advisor		Employer (See Instructions) Usaid
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cantu, Ann <hr/> Contributor address; City; State; Zip Code Conroe, TX 77385	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cantu, Ann <hr/> Contributor address; City; State; Zip Code Conroe, TX 77385	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cantu, Ann <hr/> Contributor address; City; State; Zip Code Conroe, TX 77385	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canzano, Philip <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78739	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Underwriter		9 Employer (See Instructions) Newrez
Date 07/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Capps, Emerson <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76308	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Capps, Emerson <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76308	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Care, Envision <hr/> Contributor address; City; State; Zip Code Houston, TX 77025	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Optometrist		Employer (See Instructions) Envision Eye Care
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlson, Sarah <hr/> Contributor address; City; State; Zip Code Dallas, TX 75287	Amount of Contribution (\$) \$33.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 94/692 Rpt: 97/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlton, Rachel 6 Contributor address; City; State; Zip Code Tyler, TX 75703	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlton, Rachel Contributor address; City; State; Zip Code Tyler, TX 75703	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlton, Rachel Contributor address; City; State; Zip Code Tyler, TX 75703	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carmichael, Harold Contributor address; City; State; Zip Code Dallas, TX 75226	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Art Director		Employer (See Instructions) Tpn
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carmichael, Harold Contributor address; City; State; Zip Code Dallas, TX 75226	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Art Director		Employer (See Instructions) Tpn

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carmichael, Harold <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75226	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Art Director		9 Employer (See Instructions) Tpn
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carney, Frances <hr/> Contributor address; City; State; Zip Code Hazelwood, MO 63042	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carpenter, Bridget <hr/> Contributor address; City; State; Zip Code Corinth, TX 76210	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Administrative Assistant		Employer (See Instructions) Lewisville Isd
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carrell, Theresa <hr/> Contributor address; City; State; Zip Code Lewisville, TX 75067	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Piano Teacher		Employer (See Instructions) Self-Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carrell, Theresa <hr/> Contributor address; City; State; Zip Code Lewisville, TX 75067	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Piano Teacher		Employer (See Instructions) Self-Employed

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carroll, Camille <hr/> 6 Contributor address; City; State; Zip Code Kerrville, TX 78028	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carroll, Cathy <hr/> Contributor address; City; State; Zip Code North Richland Hills, TX 76180	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carson, Donna <hr/> Contributor address; City; State; Zip Code Houston, TX 77008	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carsrud, Alan <hr/> Contributor address; City; State; Zip Code Spicewood, TX 78669	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carsrud, Alan <hr/> Contributor address; City; State; Zip Code Spicewood, TX 78669	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Anna <hr/> 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78412	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Anna <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78412	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carvajal, Carolina <hr/> Contributor address; City; State; Zip Code Dallas, TX 75206	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carvajal, Carolina <hr/> Contributor address; City; State; Zip Code Dallas, TX 75206	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carvajal, Carolina <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76110	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carvajal, Carolina <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75206	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casarez, Ruth <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casas, Graciela <hr/> Contributor address; City; State; Zip Code McAllen, TX 78504	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casas, Helene <hr/> Contributor address; City; State; Zip Code Hurst, TX 76053	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casas, Helene <hr/> Contributor address; City; State; Zip Code Hurst, TX 76053	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Case, Kenneth <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78703-1643	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casey, Marcelene <hr/> Contributor address; City; State; Zip Code Galveston, TX 77550-6852	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casse, Katie <hr/> Contributor address; City; State; Zip Code Dallas, TX 75208	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Doesn'T Matter
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castrup, Howard <hr/> Contributor address; City; State; Zip Code Bakersfield, CA 93306	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cate, Samaria <hr/> Contributor address; City; State; Zip Code Farmers Branch, TX 75234	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Christus Health

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 100/692 Rpt: 103/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cate, Samaria 6 Contributor address; City; State; Zip Code Farmers Branch, TX 75234	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Director		9 Employer (See Instructions) Christus Health
Date 07/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cates, William Contributor address; City; State; Zip Code Houston, TX 77084	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Self-Employed
Date 08/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cates, William Contributor address; City; State; Zip Code Houston, TX 77084	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Self-Employed
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cates, William Contributor address; City; State; Zip Code Houston, TX 77084	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Self-Employed
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Catherine-Oines, Jennifer Contributor address; City; State; Zip Code Blanco, TX 78606	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Event Coordinator And Sales		Employer (See Instructions) Jennifer Catherine Oines

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Catherine-Oines, Jennifer <hr/> 6 Contributor address; City; State; Zip Code Blanco, TX 78606	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Event Coordinator And Sales		9 Employer (See Instructions) Jennifer Catherine Oines
Date 07/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caulk, Karen <hr/> Contributor address; City; State; Zip Code Plano, TX 75023	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chalker, Colleen <hr/> Contributor address; City; State; Zip Code Houston, TX 77069	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaney, Ed <hr/> Contributor address; City; State; Zip Code Laguna Vists, TX 78578	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self-Employed
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charski, Sharon <hr/> Contributor address; City; State; Zip Code Houston, TX 77096-4822	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 102/692 Rpt: 105/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chase, Debra <hr/> 6 Contributor address; City; State; Zip Code Leander, TX 78641	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chase, Debra <hr/> Contributor address; City; State; Zip Code Leander, TX 78641	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chase, Debra <hr/> Contributor address; City; State; Zip Code Leander, TX 78641	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chenault, Sara <hr/> Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chester, Debbie <hr/> Contributor address; City; State; Zip Code Flower Mound, TX 75022	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 103/692 Rpt: 106/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Child, Susan <hr/> 6 Contributor address; City; State; Zip Code The Woodlands, TX 77381	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Childress, Charles <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Childress, Charles <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Childress, Charles <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Childress, Charles <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 104/692 Rpt: 107/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Childress, Charles <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78723	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Childress, Charles <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christensen, Patty <hr/> Contributor address; City; State; Zip Code Wichita Falls, NV 76301	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christian, Doris <hr/> Contributor address; City; State; Zip Code Austin, TX 78758	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christian, Robin <hr/> Contributor address; City; State; Zip Code Sanibel, FL 33957	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christiansen, Scott 6 Contributor address; City; State; Zip Code Allen, TX 75002	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self-Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christiansen, Scott Contributor address; City; State; Zip Code Allen, TX 75002	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-Employed
Date 07/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christopher, Elrica Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christopher, Elrica Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christopher, Elrica Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christopher, Julie <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78759	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christopher, Julie <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christopher, Terri <hr/> Contributor address; City; State; Zip Code Dallas, TX 75287	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cintron, Nitza <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Faculty Physician		Employer (See Instructions) Utmb At Galveston
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Ann <hr/> Contributor address; City; State; Zip Code Coppell, TX 75019	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Ann <hr/> 6 Contributor address; City; State; Zip Code Coppell, TX 75019	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Ann <hr/> Contributor address; City; State; Zip Code Coppell, TX 75019	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Ann <hr/> Contributor address; City; State; Zip Code Coppell, TX 75019	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Barrett <hr/> Contributor address; City; State; Zip Code Coppell, TX 75019	Amount of Contribution (\$) \$37.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Carolyn <hr/> Contributor address; City; State; Zip Code Garland, TX 75044	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Charles 6 Contributor address; City; State; Zip Code Austin, TX 78731	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Erin Contributor address; City; State; Zip Code Dallas, TX 75206	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Dieste
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Erin Contributor address; City; State; Zip Code Dallas, TX 75206	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Dieste
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Erin Contributor address; City; State; Zip Code Dallas, TX 75206	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Dieste
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Erin Contributor address; City; State; Zip Code Dallas, TX 75206	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Dieste

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clarke, Jody <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75229	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Designer		9 Employer (See Instructions) Self-Employed
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clarke, Jody <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Self-Employed
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clarke, Jody <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Self-Employed
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clarke, Jody <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Self-Employed
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clarke, Jody <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Self-Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 110/692 Rpt: 113/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clarke, Jody <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75229	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Designer		9 Employer (See Instructions) Self-Employed
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cleaver, Jim <hr/> Contributor address; City; State; Zip Code Portland, OR 97232	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cleaver, Jim <hr/> Contributor address; City; State; Zip Code Portland, OR 97232	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cleaver, Jim <hr/> Contributor address; City; State; Zip Code Portland, OR 97232	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clem, Ted <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 111/692 Rpt: 114/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clem, Ted <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clem, Ted <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clemenhausen, Barbara <hr/> Contributor address; City; State; Zip Code Austin, TX 78737	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Gulf Coast Power Association
Date 07/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clendenen, Beverly <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clendenen, Beverly <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 112/692 Rpt: 115/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clendenen, Beverly <hr/> 6 Contributor address; City; State; Zip Code Cedar Park, TX 78613	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clifford, Stewart <hr/> Contributor address; City; State; Zip Code Provincetown, MA 02657	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Stewart Clifford Gallery
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clisham, Joan <hr/> Contributor address; City; State; Zip Code Houston, TX 77079	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clisham, Joan <hr/> Contributor address; City; State; Zip Code Houston, TX 77079	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cloninger, Peggy <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77478	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) University Of Houston-Victoria

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cloninger, Peggy <hr/> 6 Contributor address; City; State; Zip Code Sugar Land, TX 77478	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) University Of Houston-Victoria
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cloninger, Peggy <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77478	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) University Of Houston-Victoria
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cloninger, Peggy <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77478	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Professor Of Management		Employer (See Instructions) University Of Houston-Victoria
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clowe, Celia <hr/> Contributor address; City; State; Zip Code Wimberley, TX 78676	Amount of Contribution (\$) \$58.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coburn, Sara <hr/> Contributor address; City; State; Zip Code Richmond, TX 77406	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cochran, Mathilda P <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77030-2022	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cochran, Virginia <hr/> Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cochran, Virginia <hr/> Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coe, Margaret <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Lake Travis Isd
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coe, Margaret <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Lake Travis Isd

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coe, Margaret <hr/> 6 Contributor address; City; State; Zip Code Dripping Springs, TX 78620	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Lake Travis Isd
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cofer, Mary Elizabeth <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coffman, Janet <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76110	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coffman, Janet <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76110	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cogan, Terry F <hr/> Contributor address; City; State; Zip Code La Porte, TX 77571	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cogan, Terry F <hr/> 6 Contributor address; City; State; Zip Code La Porte, TX 77571	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cogley, Amanda <hr/> Contributor address; City; State; Zip Code Punta Gorda, FL 33955	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coindreau, Patricia <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78626-2041	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) St Davids
Date 08/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coindreau, Patricia <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78626-2041	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) St Davids
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coindreau, Patricia <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78626-2041	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) St Davids

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coindreau, Patricia <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78626-2041	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Nurse		9 Employer (See Instructions) St Davids
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colbert, Norma <hr/> Contributor address; City; State; Zip Code Copperas Cove, TX 76522	Amount of Contribution (\$) \$90.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cole, Janet <hr/> Contributor address; City; State; Zip Code Houston, TX 77080	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coleman, Diana <hr/> Contributor address; City; State; Zip Code Castroville, TX 78009	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coleman, Rachel <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78259	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Risk Ops Agent		Employer (See Instructions) Ebay

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coleman, Ramona 6 Contributor address; City; State; Zip Code Arlington, TX 76002	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Sr. Consultant		9 Employer (See Instructions) Fannie Mae
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coley, Carol Contributor address; City; State; Zip Code San Antonio, TX 78248	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coley, Kitty 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) N/A
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colker, Jerry Contributor address; City; State; Zip Code Los Angeles, CA 90038	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Fitness & Wellness Professional		Employer (See Instructions) Self-Employed
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collazos, Linda Contributor address; City; State; Zip Code Houston, TX 77018	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Comeau, Alana <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77042	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Annie <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self-Employed
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Annie <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self-Employed
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Annie <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self-Employed
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Comrie, Ken <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75007-5009	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Comrie, Ken <hr/> 6 Contributor address; City; State; Zip Code Carrollton, TX 75007	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) It Director		9 Employer (See Instructions) Orphanivy.Net
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Comrie, Ken <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75007	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conley, Judith <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77479	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Connolly, Michael <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Connor, Shane <hr/> Contributor address; City; State; Zip Code Alpine, TX 79830	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conrad, Tammy <hr/> 6 Contributor address; City; State; Zip Code Round Rock, TX 78664	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Round Rock Isd
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cons, Jason <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) University Of Texas
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contardo, Joseph <hr/> Contributor address; City; State; Zip Code Denver, CO 80203	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conway, Jeremy <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conway, Jeremy <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conyngham, Jim <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78746	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conyngham, Karen <hr/> Contributor address; City; State; Zip Code Austin Tx, TX 78746-4115	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Researcher		Employer (See Instructions) Self-Employed
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conyngham, Karen <hr/> Contributor address; City; State; Zip Code Austin Tx, TX 78746-4115	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Researcher		Employer (See Instructions) Self-Employed
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conyngham, Karen <hr/> Contributor address; City; State; Zip Code Austin Tx, TX 78746-4115	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Researcher		Employer (See Instructions) Self-Employed
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Annick <hr/> Contributor address; City; State; Zip Code Savannah, TX 76227	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Annick <hr/> 6 Contributor address; City; State; Zip Code Savannah, TX 76227	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Annick <hr/> Contributor address; City; State; Zip Code Savannah, TX 76227	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, James <hr/> Contributor address; City; State; Zip Code Austin, TX 78723-3287	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) It Manager		Employer (See Instructions) Austin Isd
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Joan <hr/> Contributor address; City; State; Zip Code Dallas, TX 75238	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook-Hellberg, Karen <hr/> Contributor address; City; State; Zip Code Plano, TX 75074	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooke, Sherry <hr/> 6 Contributor address; City; State; Zip Code Sherman, TX 75092	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooley, Kristen <hr/> Contributor address; City; State; Zip Code Spring, TX 77379	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooley, Kristen <hr/> Contributor address; City; State; Zip Code Spring, TX 77379	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooley, Kristen <hr/> Contributor address; City; State; Zip Code Spring, TX 77379	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooper, Julie <hr/> Contributor address; City; State; Zip Code Schertz, TX 78154	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coppage, D. <hr/> 6 Contributor address; City; State; Zip Code Wichita Falls, TX 76302	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coppage, D. <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76302	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coppage, D. <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76302	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coppage, D. <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76302	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coppage, Walter <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76301	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Self-Employed

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coppedge, Donna <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corbin, Sonja <hr/> Contributor address; City; State; Zip Code Mckinney Tx, TX 75070	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) University Lecturer		Employer (See Instructions) Local College
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corbin, Sonja <hr/> Contributor address; City; State; Zip Code Mckinney Tx, TX 75070	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) University Lecturer		Employer (See Instructions) Local College
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corbin, Sonja <hr/> Contributor address; City; State; Zip Code Mckinney Tx, TX 75070	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) University Lecturer		Employer (See Instructions) Local College
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corey, Kim <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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4 Date 08/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cornejo, Adriana <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77074	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Customer Service		9 Employer (See Instructions) Mscu
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cornejo, Adriana <hr/> Contributor address; City; State; Zip Code Houston, TX 77074	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Customer Service		Employer (See Instructions) Mscu
Date 07/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cornell, Kelly <hr/> Contributor address; City; State; Zip Code Bedford, TX 76021	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Musician		Employer (See Instructions) Fort Worth Symphony
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cornell, Kelly <hr/> Contributor address; City; State; Zip Code Bedford, TX 76021	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Musician		Employer (See Instructions) Fort Worth Symphony
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cornell, Kelly <hr/> Contributor address; City; State; Zip Code Bedford, TX 76021	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Musician		Employer (See Instructions) Fort Worth Symphony

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coronado, Dawn <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78731	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casper, Anne <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78626	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Costello, Lauri <hr/> Contributor address; City; State; Zip Code Las Cruces, NM 88005	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cotter, Donna <hr/> Contributor address; City; State; Zip Code Dallas, TX 75208	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coulet Du Gard, Dominique <hr/> Contributor address; City; State; Zip Code Bellingham, WA 98225	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coulet Du Gard, Dominique <hr/> 6 Contributor address; City; State; Zip Code Bellingham, WA 98225	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coulet Du Gard, Dominique <hr/> Contributor address; City; State; Zip Code Bellingham, WA 98225	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coulon, Margaret <hr/> Contributor address; City; State; Zip Code Euless, TX 76040	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coulter, Sara <hr/> Contributor address; City; State; Zip Code Austin, TX 78744	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Courtney, Carolyn <hr/> Contributor address; City; State; Zip Code Palestine, TX 75801	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Programmer		Employer (See Instructions) Simulstat

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Frances 6 Contributor address; City; State; Zip Code Santa Fe, NM 87507-8052	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Self-Employed
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Melanie Contributor address; City; State; Zip Code Dripping Springs, TX 78620	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Massage Therapist		Employer (See Instructions) Self-Employed
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craig, Shelley Contributor address; City; State; Zip Code Flower Mound, TX 75022	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crane, Jiilaurie Contributor address; City; State; Zip Code Venice, FL 34292	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crane, Jiilaurie Contributor address; City; State; Zip Code Venice, FL 34292	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 131/692 Rpt: 134/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crary, Jill <hr/> 6 Contributor address; City; State; Zip Code San Diego, CA 92117	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crary, Jill <hr/> Contributor address; City; State; Zip Code San Diego, CA 92117	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crawford, Christina <hr/> Contributor address; City; State; Zip Code Houston, TX 77080-4001	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Hca
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crawford, Christina <hr/> Contributor address; City; State; Zip Code Houston, TX 77080-4001	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Hca
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crawford, Christina <hr/> Contributor address; City; State; Zip Code Houston, TX 77080-4001	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Hca

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 132/692 Rpt: 135/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crist, Candace <hr/> 6 Contributor address; City; State; Zip Code Hitchcock, TX 77563-2714	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crist, Candace <hr/> Contributor address; City; State; Zip Code Hitchcock, TX 77563-2714	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crist, Candace <hr/> Contributor address; City; State; Zip Code Hitchcock, TX 77563-2714	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crixell, Sylvia <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crocker, Salena <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 133/692 Rpt: 136/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cronauer, Gail <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75220-3701	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cronauer, Gail <hr/> Contributor address; City; State; Zip Code Dallas, TX 75220-3701	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cronauer, Gail <hr/> Contributor address; City; State; Zip Code Dallas, TX 75220	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crouch, Terri <hr/> Contributor address; City; State; Zip Code Waxahachie, TX 75165	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Social Media Manager		Employer (See Instructions) Self-Employed
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowl, Megan <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 134/692 Rpt: 137/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crown, Jenny <hr/> 6 Contributor address; City; State; Zip Code Flower Mound, TX 75028	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Pharmacist		9 Employer (See Instructions) Davitarx
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowther, Rose <hr/> Contributor address; City; State; Zip Code Hollister, CA 95023-9037	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Croyle, Philip <hr/> Contributor address; City; State; Zip Code Waco, TX 76710	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Croyle, Philip <hr/> Contributor address; City; State; Zip Code Waco, TX 76710	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Croyle, Philip <hr/> Contributor address; City; State; Zip Code Waco, TX 75710	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self-Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 135/692 Rpt: 138/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crump, Carol <hr/> 6 Contributor address; City; State; Zip Code Ft. Worth, TX 76133	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Dental Assistant		9 Employer (See Instructions) Craig Baird Dds
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crump, Carol <hr/> Contributor address; City; State; Zip Code Ft. Worth, TX 76133	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Dental Assistant		Employer (See Instructions) Craig Baird Dds
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crump, Carol <hr/> Contributor address; City; State; Zip Code Ft. Worth, TX 76133	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Dental Assistant		Employer (See Instructions) Craig Baird Dds
Date 07/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crump, Ruth <hr/> Contributor address; City; State; Zip Code Madison, WI 53705	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crump, Ruth <hr/> Contributor address; City; State; Zip Code Madison, WI 53705	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 136/692 Rpt: 139/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crump, Ruth <hr/> 6 Contributor address; City; State; Zip Code Madison, WI 53705	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crutchfield, Kacey <hr/> Contributor address; City; State; Zip Code Plano, TX 75074	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Editor		Employer (See Instructions) Self-Employed
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruzen, Kathryn <hr/> Contributor address; City; State; Zip Code Cypress, TX 77429	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Culig, Pete <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Culling, Sara <hr/> Contributor address; City; State; Zip Code Portland, OR 97217	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Ohsu

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 137/692 Rpt: 140/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cullingford, Elizabeth <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78703	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Professor Of English		9 Employer (See Instructions) University Of Texas At Austin
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cullingford, Elizabeth <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Professor Of English		Employer (See Instructions) University Of Texas At Austin
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cullingford, Elizabeth <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Professor Of English		Employer (See Instructions) University Of Texas At Austin
Date 07/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, Brenda <hr/> Contributor address; City; State; Zip Code Conroe, TX 77384	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cupp, Christine <hr/> Contributor address; City; State; Zip Code Plano, TX 75074	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 138/692 Rpt: 141/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cuppett, Tim <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78756	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Architect		9 Employer (See Instructions) Self-Employed
Date 08/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cuppett, Tim <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Self-Employed
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cuppett, Tim <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Self-Employed
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curlee, Jr <hr/> Contributor address; City; State; Zip Code Clifton, TX 76634	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curry, Marcia <hr/> Contributor address; City; State; Zip Code Alamo, TX 78516	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 139/692 Rpt: 142/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curry, Marcia <hr/> 6 Contributor address; City; State; Zip Code Alamo, TX 78516	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curry, Marcia <hr/> Contributor address; City; State; Zip Code Alamo, TX 78516	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cuthbertson, Brian <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cuthbertson, Brian <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cynthia R Maguire, Cynthia <hr/> Contributor address; City; State; Zip Code Round Rock Tx, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cynthia R Maguire, Cynthia <hr/> 6 Contributor address; City; State; Zip Code Round Rock Tx, TX 78681	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cynthia R Maguire, Cynthia <hr/> Contributor address; City; State; Zip Code Round Rock Tx, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Czarny, Judy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Czinder, Cynthia <hr/> Contributor address; City; State; Zip Code Bacliff, TX 77518-1122	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Loan Boarder		Employer (See Instructions) Zions Bancorporation
Date 07/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D Piner, Elizabeth <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 141/692 Rpt: 144/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D Piner, Elizabeth 6 Contributor address; City; State; Zip Code Austin, TX 78729	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D Piner, Elizabeth Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D'Ancona, Amy Contributor address; City; State; Zip Code Philadelphia, PA 19131	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D'Ancona, Amy Contributor address; City; State; Zip Code Philadelphia, PA 19131	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D'Ancona, Amy Contributor address; City; State; Zip Code Philadelphia, PA 19131	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 142/692 Rpt: 145/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danaher, Beverly <hr/> 6 Contributor address; City; State; Zip Code Mesquite, TX 75150	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniel, Adrien <hr/> Contributor address; City; State; Zip Code Houston, TX 77063	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self-Employed
Date 07/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniels, Nancy <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78217	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniels, Nancy <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78217	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danley, Kathleen And Mike <hr/> Contributor address; City; State; Zip Code La Verne, CA 91750	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 143/692 Rpt: 146/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danley, Kathleen And Mike <hr/> 6 Contributor address; City; State; Zip Code La Verne, CA 91750	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danley, Kathleen And Mike <hr/> Contributor address; City; State; Zip Code La Verne, CA 91750	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danley, Kathleen And Mike <hr/> Contributor address; City; State; Zip Code La Verne, CA 91750	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dansby, Clarice <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danyko, Donald <hr/> Contributor address; City; State; Zip Code Ann Arbor, MI 48105	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 144/692 Rpt: 147/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darby, Helen <hr/> 6 Contributor address; City; State; Zip Code Silver Spring, MD 20905	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darce, Sharee <hr/> Contributor address; City; State; Zip Code Austin, TX 78728-5480	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daricek, Leslie <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77382	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/03/2024	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 (\$) \$5.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Uic
Date 07/23/2024	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 (\$) \$5.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Uic

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 145/692 Rpt: 148/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/02/2024	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 (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) Uic
Date 09/30/2024	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 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davenport, Meredith <hr/> Contributor address; City; State; Zip Code Wimberley, TX 78676	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Obhg
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Alana <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080	Amount of Contribution (\$) \$111.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Diane <hr/> Contributor address; City; State; Zip Code Spicewood, TX 78669	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 146/692 Rpt: 149/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Diane <hr/> 6 Contributor address; City; State; Zip Code Spicewood, TX 78669	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Julie <hr/> Contributor address; City; State; Zip Code Sherman, TX 75092	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Kimberley <hr/> Contributor address; City; State; Zip Code Grapevine, TX 76051	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Krista <hr/> Contributor address; City; State; Zip Code Beeville, TX 78102	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Linda <hr/> Contributor address; City; State; Zip Code Austin, TX 78758	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 147/692 Rpt: 150/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Mark 6 Contributor address; City; State; Zip Code Coppell, TX 75019	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Sue Contributor address; City; State; Zip Code Houston, TX 77035	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Sue Davis
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Sue Contributor address; City; State; Zip Code Houston, TX 77035	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Sue Davis
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Sue Contributor address; City; State; Zip Code Houston, TX 77035	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Sue Davis
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davison, Linda Contributor address; City; State; Zip Code Bryan, TX 77803	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 148/692 Rpt: 151/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davison, Linda <hr/> 6 Contributor address; City; State; Zip Code Bryan, TX 77803	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davison, Linda <hr/> Contributor address; City; State; Zip Code Bryan, TX 77803	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davison, Linda <hr/> Contributor address; City; State; Zip Code Bryan, TX 77803	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Day, Tarissa <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De La Fuente, Jessica <hr/> Contributor address; City; State; Zip Code Baytown, TX 77523	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 149/692 Rpt: 152/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deagan, Tracy <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78704	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) Therapist		9 Employer (See Instructions) Self-Employed
Date 08/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deagan, Tracy <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) Self-Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deagan, Tracy <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) Self-Employed
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deats, B C <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Deats Durst Owen & Levy PLLC
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Debolt, Linda <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 150/692 Rpt: 153/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dederich, Ruth <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75230	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dederich, Ruth <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dederich, Ruth <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dehart, Leslie <hr/> Contributor address; City; State; Zip Code Hutto, TX 78634	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) 512 Drywall
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dehart, Leslie <hr/> Contributor address; City; State; Zip Code Hutto, TX 78634	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) 512 Drywall

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dehart, Leslie <hr/> 6 Contributor address; City; State; Zip Code Hutto, TX 78634	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) 512 Drywall
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deiterman, Patsy <hr/> Contributor address; City; State; Zip Code Waco, TX 76710	Amount of Contribution (\$) \$46.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Del Monte, Jacqueline <hr/> Contributor address; City; State; Zip Code Clayton, CA 94517	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Del Monte, Jacqueline <hr/> Contributor address; City; State; Zip Code Clayton, CA 94517	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Del Monte, Jacqueline <hr/> Contributor address; City; State; Zip Code Clayton, CA 94517	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 152/692 Rpt: 155/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delamar, Angela <hr/> 6 Contributor address; City; State; Zip Code Laguna Vista, TX 78578-2785	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delamar, Angela <hr/> Contributor address; City; State; Zip Code Laguna Vista, TX 78578-2785	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delamar, Angela <hr/> Contributor address; City; State; Zip Code Laguna Vista, TX 78578-2785	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Depena, Debra <hr/> Contributor address; City; State; Zip Code Spring, TX 77379	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dessain, Erin <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$55.55
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devassal, Arianne <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77077	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deysarkar, Shion <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Datafiniti
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deysarkar, Shion <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Datafiniti
Date 07/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickens, Michelle <hr/> Contributor address; City; State; Zip Code Austin, TX 78736	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Market Reaearch		Employer (See Instructions) Kantar
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickens, Michelle <hr/> Contributor address; City; State; Zip Code Austin, TX 78736	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Market Reaearch		Employer (See Instructions) Kantar

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 154/692 Rpt: 157/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickens, Michelle <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78736	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Market Reaearch		9 Employer (See Instructions) Kantar
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickinson, Carole <hr/> Contributor address; City; State; Zip Code Houston, TX 77098	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickinson, Carole <hr/> Contributor address; City; State; Zip Code Houston, TX 77098	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Didlake, Elizabeth <hr/> Contributor address; City; State; Zip Code Dallas, TX 75244	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Mental Health Coach		Employer (See Instructions) Self-Employed
Date 07/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Didlake, William <hr/> Contributor address; City; State; Zip Code Dallas, TX 75244	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Office Of William Didlake P.C.

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Didlake, William <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75244	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Law Office Of William Didlake P.C.
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Didlake, William <hr/> Contributor address; City; State; Zip Code Dallas, TX 75244	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Office Of William Didlake P.C.
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diebold, Elizabeth <hr/> Contributor address; City; State; Zip Code Argyle, TX 76226	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diebold, Elizabeth <hr/> Contributor address; City; State; Zip Code Argyle, TX 76226	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dietz, Lucy <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Dpd Pllc

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dileo, Tracy <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78703	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Limited Partner		9 Employer (See Instructions) Killam Company
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dillon, Charity <hr/> Contributor address; City; State; Zip Code Spring, TX 77389	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Logistics Coordinator		Employer (See Instructions) Pbf Energy
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dillon, Charity <hr/> Contributor address; City; State; Zip Code Spring, TX 77389	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Logistics Coordinator		Employer (See Instructions) Pbf Energy
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dimasi, Rachel <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dinneen, Nick <hr/> Contributor address; City; State; Zip Code Windcrest, TX 78239-2652	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dinneen, Nick 6 Contributor address; City; State; Zip Code Windcrest, TX 78239-2652	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dinneen, Nick Contributor address; City; State; Zip Code Windcrest, TX 78239-2652	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dinneen, Nick Contributor address; City; State; Zip Code Windcrest, TX 78239-2652	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diot, Deborah Contributor address; City; State; Zip Code Flower Mound, TX 75022	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Centillion
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diot, Deborah Contributor address; City; State; Zip Code Flower Mound, TX 75022	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Centillion

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 158/692 Rpt: 161/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diot, Deborah 6 Contributor address; City; State; Zip Code Flower Mound, TX 75022	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions) Centillion
Date 08/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diot, Deborah Contributor address; City; State; Zip Code Flower Mound, TX 75022	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Centillion
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diot, Deborah Contributor address; City; State; Zip Code Flower Mound, TX 75022	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Centillion
Date 08/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diot, Deborah Contributor address; City; State; Zip Code Flower Mound, TX 75022	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Centillion
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diot, Deborah Contributor address; City; State; Zip Code Flower Mound, TX 75022	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Centillion

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diot, Deborah <hr/> 6 Contributor address; City; State; Zip Code Flower Mound, TX 75022	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions) Centillion
Date 09/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diot, Deborah <hr/> Contributor address; City; State; Zip Code Flower Mound, TX 75022	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Centillion
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diot, Deborah <hr/> Contributor address; City; State; Zip Code Flower Mound, TX 75022	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Centillion
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Divita, Lorynn <hr/> Contributor address; City; State; Zip Code Woodway, TX 76712	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Baylor University
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dixon, Carol <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78248	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dixon, Gaye <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76123	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dixon, Joyce <hr/> Contributor address; City; State; Zip Code Dallas, TX 75372	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) Operations		Employer (See Instructions) Self-Employed
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dobervich, Mary Jane <hr/> Contributor address; City; State; Zip Code Tyler, TX 75703	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dobervich, Mary Jane <hr/> Contributor address; City; State; Zip Code Tyler, TX 75703	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dobervich, Mary Jane <hr/> Contributor address; City; State; Zip Code Tyler, TX 75703	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 161/692 Rpt: 164/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dobie, Susan <hr/> 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78418	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dobie, Susan <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78418	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dobie, Susan <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78418	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dock, Nora <hr/> Contributor address; City; State; Zip Code Chester, VT 05143-9373	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Educational Administration		Employer (See Instructions) Vermont Academy
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodson, Carole <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doepner, Melody <hr/> 6 Contributor address; City; State; Zip Code Martindale, TX 78655	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Mail Processing Clerk		9 Employer (See Instructions) United States Postal Service
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doering, Janis <hr/> Contributor address; City; State; Zip Code Garland, TX 75044	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doering, Janis <hr/> Contributor address; City; State; Zip Code Garland, TX 75044	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doherty, Angi <hr/> Contributor address; City; State; Zip Code Dallas, TX 75208	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Corelogic
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Domiteaux, L <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self-Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 163/692 Rpt: 166/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Domiteaux, L 6 Contributor address; City; State; Zip Code Dallas, TX 75230	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Psychologist		9 Employer (See Instructions) Self-Employed
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Domiteaux, L Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self-Employed
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donner, Peg Contributor address; City; State; Zip Code Laguna Beach, CA 92651	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donnes, Charlie Contributor address; City; State; Zip Code Billings, MT 59101	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donnes, Charlie Contributor address; City; State; Zip Code Billings, MT 59101	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donnes, Charlie <hr/> 6 Contributor address; City; State; Zip Code Billings, MT 59101	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donnes, Charlie <hr/> Contributor address; City; State; Zip Code Billings, MT 59101	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donnes, Charlie <hr/> Contributor address; City; State; Zip Code Billings, MT 59101	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donnes, Charlie <hr/> Contributor address; City; State; Zip Code Billings, MT 59101	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doornik, Lisa <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77381	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dorsey, Lindee <hr/> 6 Contributor address; City; State; Zip Code League City, TX 77573	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Utah State University
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doty, Rev. Dr. Mark <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78232	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doty, Rev. Dr. Mark <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78232	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doty, Rev. Dr. Mark <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78232	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Douglas, Janet <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dow, Lisa <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78731	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dow, Lisa <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doyle, Susan <hr/> Contributor address; City; State; Zip Code Industry, PA 15052	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doyle, Susan <hr/> Contributor address; City; State; Zip Code Industry, PA 15052	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drablos, Kelly <hr/> Contributor address; City; State; Zip Code Dallas, TX 75235	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drablos, Kelly <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75235	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drablos, Kelly <hr/> Contributor address; City; State; Zip Code Dallas, TX 75235	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drayer, Karen <hr/> Contributor address; City; State; Zip Code Dallas Tx, TX 75230-5226	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dresdale, Arthur <hr/> Contributor address; City; State; Zip Code New York, NY 10028	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Physician Reviewer		Employer (See Instructions) Medreview
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dresdale, Arthur <hr/> Contributor address; City; State; Zip Code New York, NY 10028	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Physician Reviewer		Employer (See Instructions) Medreview

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drews, Holly <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77009	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duchon, Lisa <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duchon, Lisa <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duchon, Lisa <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dudish, Kimberly <hr/> Contributor address; City; State; Zip Code Allen, TX 75013	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dudley, Susan <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78737	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dudley, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78737	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dudley, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78737	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duke, Deborah <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76179	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) City If Fort Worth
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duke, Deborah <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76179	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) City If Fort Worth

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duke, Deborah <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76179	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Librarian		9 Employer (See Instructions) City If Fort Worth
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duke, Lorna <hr/> Contributor address; City; State; Zip Code Mart, TX 76664	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duncan, Amy <hr/> Contributor address; City; State; Zip Code Bulverde, TX 78163	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunn, Louise <hr/> Contributor address; City; State; Zip Code Lake Placid, NY 12946	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunn, William <hr/> Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Product Development Consultant		Employer (See Instructions) Self-Employed

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunn, William <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78727	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Product Development Consultant		9 Employer (See Instructions) Self-Employed
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Durante, Laurie <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Durby, Maibritt <hr/> Contributor address; City; State; Zip Code Flower Mound, TX 75028	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Durland, Judy <hr/> Contributor address; City; State; Zip Code Troup, TX 75789	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dutcher, Deborah <hr/> Contributor address; City; State; Zip Code Schertz, TX 78154	Amount of Contribution (\$) \$23.00
Principal occupation / Job title (See Instructions) Web Artist		Employer (See Instructions) Self-Employed

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dye, Mary 6 Contributor address; City; State; Zip Code Cedar Park, TX 78630	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dyer, Sharon Contributor address; City; State; Zip Code Washington, DC 20012	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Federal Government
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dyer, Sharon Contributor address; City; State; Zip Code Washington, DC 20012	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Federal Government
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dyer, Sharon Contributor address; City; State; Zip Code Washington, DC 20012	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Federal Government
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) E Holly, Karyn Contributor address; City; State; Zip Code Dallas, TX 75240	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eads, Kathy <hr/> 6 Contributor address; City; State; Zip Code Pasadena, TX 77506	7 Amount of Contribution (\$) \$36.55
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eads, Kathy <hr/> Contributor address; City; State; Zip Code Pasadena, TX 77506	Amount of Contribution (\$) \$36.55
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eads, Kathy <hr/> Contributor address; City; State; Zip Code Pasadena, TX 77506	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Pasadena Independent School District
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eads, Kathy <hr/> Contributor address; City; State; Zip Code Pasadena, TX 77506	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Pasadena Independent School District
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eads, Kathy <hr/> Contributor address; City; State; Zip Code Pasadena, TX 77506	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Pasadena Independent School District

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ebdon, Julie <hr/> 6 Contributor address; City; State; Zip Code Carrollton, TX 75007	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eddleman, Elisa <hr/> Contributor address; City; State; Zip Code Houston, TX 77084	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eddleman, Elisa <hr/> Contributor address; City; State; Zip Code Houston, TX 77084	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eddleman, Elisa <hr/> Contributor address; City; State; Zip Code Houston, TX 77084	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edgington, Stewart <hr/> Contributor address; City; State; Zip Code Austin, TX 78736-1841	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edmonds, Michelle 6 Contributor address; City; State; Zip Code Fort Worth, TX 76109	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Beverly Contributor address; City; State; Zip Code Hallettsville, TX 77964	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Beverly Contributor address; City; State; Zip Code Hallettsville, TX 77964	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 07/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Patricia Contributor address; City; State; Zip Code Wimberley, TX 78676	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Patricia Contributor address; City; State; Zip Code Wimberley, TX 78676	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 176/692 Rpt: 179/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Patricia <hr/> 6 Contributor address; City; State; Zip Code Wimberley, TX 78676	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eilenberger, Brenda <hr/> Contributor address; City; State; Zip Code Buda, TX 78610	Amount of Contribution (\$) \$47.05
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eilenberger, Brenda <hr/> Contributor address; City; State; Zip Code Buda, TX 78610	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eilenberger, Brenda <hr/> Contributor address; City; State; Zip Code Buda, TX 78610	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eisenberg, Daisy <hr/> Contributor address; City; State; Zip Code Cool, CA 95614	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) Cool Management Inc.

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 177/692 Rpt: 180/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eisenberg, Daisy <hr/> 6 Contributor address; City; State; Zip Code Cool, CA 95614	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Office Manager		9 Employer (See Instructions) Cool Management Inc.
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elbrecht, Megan <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eldridge, Carole <hr/> Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) University Administrator		Employer (See Instructions) Chamberlain University
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Jared <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Management		Employer (See Instructions) Ariat International Inc.
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Katharine <hr/> Contributor address; City; State; Zip Code San Diego, CA 92111	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Peter 6 Contributor address; City; State; Zip Code Austin, TX 78703	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Peter Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Embry, Marian Contributor address; City; State; Zip Code Colleyville, TX 76034	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emerson, C Shelley Contributor address; City; State; Zip Code Saratoga, CA 95070	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emerson, C Shelley Contributor address; City; State; Zip Code Saratoga, CA 95070	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emerson, C Shelley <hr/> 6 Contributor address; City; State; Zip Code Saratoga, CA 95070	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emerson, C Shelley <hr/> Contributor address; City; State; Zip Code Saratoga, CA 95070	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emerson, C Shelley <hr/> Contributor address; City; State; Zip Code Saratoga, CA 95070	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emerson, C Shelley <hr/> Contributor address; City; State; Zip Code Saratoga, CA 95070	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emerson, C Shelley <hr/> Contributor address; City; State; Zip Code Saratoga, CA 95070	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emerson, C Shelley <hr/> 6 Contributor address; City; State; Zip Code Saratoga, CA 95070	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emerson, C Shelley <hr/> Contributor address; City; State; Zip Code Saratoga, CA 95070	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emerson, C Shelley <hr/> Contributor address; City; State; Zip Code Saratoga, CA 95070	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emerson, C Shelley <hr/> Contributor address; City; State; Zip Code Saratoga, CA 95070	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emerson, C Shelley <hr/> Contributor address; City; State; Zip Code Saratoga, CA 95070	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emerson, C Shelley <hr/> 6 Contributor address; City; State; Zip Code Saratoga, CA 95070	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) England, Blair <hr/> Contributor address; City; State; Zip Code New York, NY 10075	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Englet, Tracy <hr/> Contributor address; City; State; Zip Code Houston, TX 77008	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Lice Ranger
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Enriquez, Shannon <hr/> Contributor address; City; State; Zip Code Dallas, TX 75228-3334	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) City Of Dallas
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Enriquez, Shannon <hr/> Contributor address; City; State; Zip Code Dallas, TX 75228-3334	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) City Of Dallas

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Enriquez, Shannon <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75228-3334	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) Librarian		9 Employer (See Instructions) City Of Dallas
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ensey, Kathleen <hr/> Contributor address; City; State; Zip Code Austin, TX 78722	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ensey, Kathleen <hr/> Contributor address; City; State; Zip Code Austin, TX 78722	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erhart, Martin <hr/> Contributor address; City; State; Zip Code Austin, TX 78750	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erhart, Martin <hr/> Contributor address; City; State; Zip Code Austin, TX 78750	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ertel, Stephanie <hr/> 6 Contributor address; City; State; Zip Code Mountain Home, TX 78058	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Escalon, Fabiola <hr/> Contributor address; City; State; Zip Code Mcallen, TX 78503	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Estrada, Debra <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78412	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Morehead Dotts Rybak
Date 07/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Etheridge, Nancy <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Etheridge, Nancy <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Deborah <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78633	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Barista		9 Employer (See Instructions) Starbucks
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Janette Sarnev <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78232	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Flight Attendant		Employer (See Instructions) United Airlines
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Jason <hr/> Contributor address; City; State; Zip Code Houston, TX 77023	Amount of Contribution (\$) \$41.55
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Jennifer <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions) Claudia Boles Cpa
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Jennifer <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions) Clboles Cpa

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Kathryn <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660-2734	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Michael <hr/> Contributor address; City; State; Zip Code Dallas, TX 75208	Amount of Contribution (\$) \$9.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Rebecca <hr/> Contributor address; City; State; Zip Code Grapevine, TX 76051	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eveleigh, Deepa <hr/> Contributor address; City; State; Zip Code Austin, TX 78736	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ewald, Bart <hr/> Contributor address; City; State; Zip Code Hilltop Lakes, TX 77871	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ewald, Bart <hr/> 6 Contributor address; City; State; Zip Code Hilltop Lakes, TX 77871	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ewald, Bart <hr/> Contributor address; City; State; Zip Code Hilltop Lakes, TX 77871	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) F Harper, Bridget <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75071	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Technology Specialist		Employer (See Instructions) Mckinney Isd
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fain, Melanie <hr/> Contributor address; City; State; Zip Code Boerne, TX 78006	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fairbanks, Tiffany <hr/> Contributor address; City; State; Zip Code Montgomery, TX 77316	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fairchild, Jamie <hr/> 6 Contributor address; City; State; Zip Code Sugar Land, TX 77479	7 Amount of Contribution (\$) \$91.55
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fairchild, Jamie <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77479	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Domestic Engineer		Employer (See Instructions) Self-Employed
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fancher, Lydia <hr/> Contributor address; City; State; Zip Code Houston, TX 77095	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farmer, Carolyn <hr/> Contributor address; City; State; Zip Code Waco, TX 76710	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farmer, Carolyn <hr/> Contributor address; City; State; Zip Code Waco, TX 76710	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farmer, David 6 Contributor address; City; State; Zip Code Euless, TX 76039	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farmer, Paige Contributor address; City; State; Zip Code Dallas, TX 75244	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Dallas Isd
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farrell, Karen Contributor address; City; State; Zip Code Houston, TX 77091	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Farrells Art Glass
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farrell, Karen Contributor address; City; State; Zip Code Houston, TX 77091	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Farrells Art Glass
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farrell, Karen Contributor address; City; State; Zip Code Houston, TX 77091	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Karen Farrell

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4 Date 07/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farris, Becky <hr/> 6 Contributor address; City; State; Zip Code North Richland Hills, TX 76180	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farris, Becky <hr/> Contributor address; City; State; Zip Code North Richland Hills, TX 76180	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faude, Jenna <hr/> Contributor address; City; State; Zip Code Washington, DC 20008	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Hr Associate		Employer (See Instructions) Capital One
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faude, Jenna <hr/> Contributor address; City; State; Zip Code Washington, DC 20008	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Hr Associate		Employer (See Instructions) Capital One
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faude, Jenna <hr/> Contributor address; City; State; Zip Code Washington, DC 20008	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Hr Associate		Employer (See Instructions) Capital One

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 190/692 Rpt: 193/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fekete, Somita <hr/> 6 Contributor address; City; State; Zip Code Midland, TX 79701	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fekete, Somita <hr/> Contributor address; City; State; Zip Code Midland, TX 79701	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fekete, Somita <hr/> Contributor address; City; State; Zip Code Midland, TX 79701	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felan, Sheree <hr/> Contributor address; City; State; Zip Code Richland Hills, TX 76118	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Csm		Employer (See Instructions) Lwt
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fenton, Truman <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Patent Attorney		Employer (See Instructions) Self-Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 191/692 Rpt: 194/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferebee, Lequinne <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78209	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferebee, Lequinne <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Becky D <hr/> Contributor address; City; State; Zip Code Wylie, TX 75098	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fernandez, Katherine <hr/> Contributor address; City; State; Zip Code Houston, TX 77008	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Katherine Fernandez
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fernandez, Katherine <hr/> Contributor address; City; State; Zip Code Houston, TX 77008	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Katherine Fernandez

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fernandez, Katherine 6 Contributor address; City; State; Zip Code Houston, TX 77008	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Self Employed		9 Employer (See Instructions) Katherine Fernandez
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferrell, Donna Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Self-Employed
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferrell, Donna Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Self-Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferrell, Donna Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Self-Employed
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferris, Lavelle Contributor address; City; State; Zip Code Grand Prairie, TX 75054	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Gatesville Isd

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 193/692 Rpt: 196/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferris, Lavelle <hr/> 6 Contributor address; City; State; Zip Code Grand Prairie, TX 75054	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Gatesville Isd
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferris, Lavelle <hr/> Contributor address; City; State; Zip Code Grand Prairie, TX 75054	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Gatesville Isd
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Filbert, Susan <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21212	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Filbert, Susan <hr/> Contributor address; City; State; Zip Code Baltimore, MD 21212	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fillmore, Rollin <hr/> Contributor address; City; State; Zip Code Waco, TX 76707	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 194/692 Rpt: 197/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/31/2024	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 (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Massage Therapist		9 Employer (See Instructions) Self-Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finegold, Milton <hr/> Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finfer, Melisa <hr/> Contributor address; City; State; Zip Code North Richland Hills, TX 76182	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finley, Shawn <hr/> Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Credit Manager		Employer (See Instructions) Jcpenney
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finley, Shawn <hr/> Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Credit Manager		Employer (See Instructions) Jcpenney

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finley, Shawn <hr/> 6 Contributor address; City; State; Zip Code Plano, TX 75075	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Credit Manager		9 Employer (See Instructions) Jcpenney
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finley, Susan <hr/> Contributor address; City; State; Zip Code Marysville, WA 98270	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finley, Susan <hr/> Contributor address; City; State; Zip Code Marysville, WA 98270	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finneran, Jane <hr/> Contributor address; City; State; Zip Code New Braunfels, TX 78132	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fischer, Sa <hr/> Contributor address; City; State; Zip Code Houston, TX 77024	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fischer, Sa <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77024	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fischer, Sa <hr/> Contributor address; City; State; Zip Code Houston, TX 77024	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Nancy <hr/> Contributor address; City; State; Zip Code Garland, TX 75044	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions) Self-Employed
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Nancy <hr/> Contributor address; City; State; Zip Code Garland, TX 75044	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions) Self-Employed
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Nancy <hr/> Contributor address; City; State; Zip Code Garland, TX 75044	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions) Self-Employed

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Tracy 6 Contributor address; City; State; Zip Code Coppell, TX 75019	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Tracy Contributor address; City; State; Zip Code Coppell, TX 75019	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Tracy Contributor address; City; State; Zip Code Coppell, TX 75019	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Tracy Contributor address; City; State; Zip Code Coppell, TX 75019	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisk, Raymond Contributor address; City; State; Zip Code San Marcos, TX 78666-4927	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Texas State University

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fitch, Michelle <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76112	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fitch, Michelle <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76112	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fitch, Michelle <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76112	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fitzpatrick, Andrea <hr/> Contributor address; City; State; Zip Code Austin, TX 78737	Amount of Contribution (\$) \$9.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fladmark, Michael J <hr/> Contributor address; City; State; Zip Code Tool, TX 75143	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Solar Pv & Sustainability Designer/Developer		Employer (See Instructions) Self-Employed

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fladmark, Michael J <hr/> 6 Contributor address; City; State; Zip Code Tool, TX 75143	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Solar Pv & Sustainability Designer/Developer		9 Employer (See Instructions) Self-Employed
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fladmark, Michael J <hr/> Contributor address; City; State; Zip Code Tool, TX 75143	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Solar Pv & Sustainability Designer/Developer		Employer (See Instructions) Self-Employed
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fladmark, Michael J <hr/> Contributor address; City; State; Zip Code Tool, TX 75143	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Solar Pv & Sustainability Designer/Developer		Employer (See Instructions) Self-Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fladmark, Michael J <hr/> Contributor address; City; State; Zip Code Tool, TX 75143	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Solar Pv & Sustainability Designer/Developer		Employer (See Instructions) Self-Employed
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flanagan, Susan <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 200/692 Rpt: 203/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fletcher, Ava <hr/> 6 Contributor address; City; State; Zip Code Lakeway, TX 78734	7 Amount of Contribution (\$) \$54.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fletcher, Leslie <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76135	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flores, Rhonda <hr/> Contributor address; City; State; Zip Code Selma, TX 78154	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flores, Rhonda <hr/> Contributor address; City; State; Zip Code Selma, TX 78154	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flores, Rhonda <hr/> Contributor address; City; State; Zip Code Selma, TX 78154	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Florez, Amy <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75218	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Trade Marketing		9 Employer (See Instructions) Westland Distillery
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Florez, Amy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75218	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Trade Marketing		Employer (See Instructions) Westland Distillery
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Florez, Amy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75218	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Trade Marketing		Employer (See Instructions) Westland Distillery
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Florez, Dalene <hr/> Contributor address; City; State; Zip Code Dallas, TX 75243-6134	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Florez, Dalene <hr/> Contributor address; City; State; Zip Code Dallas, TX 75243	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Verizon

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 202/692 Rpt: 205/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Florez, Pam <hr/> 6 Contributor address; City; State; Zip Code Rockwall, TX 75087	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions) Self-Employed
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flory, Gwen <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) National Wildlife Federation
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flynn, Jenifer <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flynn, Jenifer <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flynn, Jenifer <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flynn, Jenifer <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75225	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flynn, Peter <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flynn, Peter <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fojtasek, Olamaie <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fojtasek, Olamaie <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Folsom, Anna <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78260	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Comal Isd
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Folsom, Anna <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78260	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Comal Isd
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Folsom, Anna <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78260	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Comal Isd
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Folsom, Annalee <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78260	Amount of Contribution (\$) \$19.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fomel, Tatiana <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 205/692 Rpt: 208/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fomel, Tatiana <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78759	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fomel, Tatiana <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Forbes, William <hr/> Contributor address; City; State; Zip Code Nacogdoches, TX 75963	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Associate Professor		Employer (See Instructions) Stephen F. Austin State University
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Forbes, William <hr/> Contributor address; City; State; Zip Code Nacogdoches, TX 75963	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Associate Professor		Employer (See Instructions) Stephen F. Austin State University
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Forrester, Amanda <hr/> Contributor address; City; State; Zip Code Brazoria, TX 77422	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 206/692 Rpt: 209/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fortney, Mary <hr/> 6 Contributor address; City; State; Zip Code Mechanicsburg, PA 17050	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fortney, Mary <hr/> Contributor address; City; State; Zip Code Mechanicsburg, PA 17050	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fortney, Mary <hr/> Contributor address; City; State; Zip Code Mechanicsburg, PA 17050	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fortune, Ira <hr/> Contributor address; City; State; Zip Code Killeen, TX 76542	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foshee, Linda <hr/> Contributor address; City; State; Zip Code Hattiesburg, MS 39404-8825	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foshee, Linda <hr/> 6 Contributor address; City; State; Zip Code Hattiesburg, MS 39404-8825	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foss, Linda <hr/> Contributor address; City; State; Zip Code Austin, TX 78715	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foss, Linda <hr/> Contributor address; City; State; Zip Code Austin, TX 78715	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foss, Linda <hr/> Contributor address; City; State; Zip Code Austin, TX 78715	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foster, Cheryl <hr/> Contributor address; City; State; Zip Code Waco, TX 76708	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foster, Kay <hr/> 6 Contributor address; City; State; Zip Code Dripping Springs, TX 78620	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Interior Designer		9 Employer (See Instructions) Jerri Kunz Design
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fox, Michelle <hr/> Contributor address; City; State; Zip Code Austin, TX 78750	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fragnoli, Kathy <hr/> Contributor address; City; State; Zip Code San Diego, CA 92101	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Mediator		Employer (See Instructions) Self-Employed
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frary, Marsha <hr/> Contributor address; City; State; Zip Code Spring, TX 77380	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fratina, Cynthia <hr/> Contributor address; City; State; Zip Code Houston, TX 77096	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Spring Branch Isd

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fratina, Cynthia <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77096	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Spring Branch Isd
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fratkin, Melyssa <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Program Director		Employer (See Instructions) The University Of Texas At Austin
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freedman, Stephen <hr/> Contributor address; City; State; Zip Code Lewisville, TX 75056	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeman, Margaret <hr/> Contributor address; City; State; Zip Code West Columbia, TX 77486	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeman, Samina <hr/> Contributor address; City; State; Zip Code Dallas, TX 75208	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freer, Jill <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76107	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freer, Jill <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76107	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freer, Jill <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76107	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freer, Jill <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76107	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freer, Jill <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76107	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freiburger, Ann <hr/> 6 Contributor address; City; State; Zip Code New Braunfels, TX 78132	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frey, Julie <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Griffin Frey PLLC
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fridrich, Pamela <hr/> Contributor address; City; State; Zip Code Buda, TX 78610	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fridrich, Pamela <hr/> Contributor address; City; State; Zip Code Buda, TX 78610	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fridrich, Pamela <hr/> Contributor address; City; State; Zip Code Buda, TX 78610	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friedrichs, Kim <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78759	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frietze, Ana <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78228	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Program Director		Employer (See Instructions) Oblate Service Corp
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frizzell, Lisa <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75070-2713	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Fisd
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frogge, Teresa <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78251	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Letter Carrier		Employer (See Instructions) Usps
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Jeanne <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78248	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Web-Building Marketing		Employer (See Instructions) Self-Employed

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Jeanne 6 Contributor address; City; State; Zip Code San Antonio, TX 78248	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Web-Building Marketing		9 Employer (See Instructions) Self-Employed
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Jeanne Contributor address; City; State; Zip Code San Antonio, TX 78248	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Web-Building Marketing		Employer (See Instructions) Self-Employed
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Jeanne Contributor address; City; State; Zip Code San Antonio, TX 78248	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Web-Building Marketing		Employer (See Instructions) Self-Employed
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fulton, Cynthia Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fulton, Cynthia Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fulton, Cynthia <hr/> 6 Contributor address; City; State; Zip Code Irving, TX 75062	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fulton, Cynthia <hr/> Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fulton, Jerry <hr/> Contributor address; City; State; Zip Code Richardson, TX 75081	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fulton, Jerry <hr/> Contributor address; City; State; Zip Code Richardson, TX 75081	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fulton, Jerry <hr/> Contributor address; City; State; Zip Code Richardson, TX 75081	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fulton, Linda <hr/> 6 Contributor address; City; State; Zip Code Erie, CO 80516	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fulton, Linda <hr/> Contributor address; City; State; Zip Code Erie, CO 80516	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Funderburg, Lin <hr/> Contributor address; City; State; Zip Code Leander, TX 78641	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Psychiatrist		Employer (See Instructions) Self-Employed
Date 08/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Funk, Darlene <hr/> Contributor address; City; State; Zip Code Comfort, TX 78013	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fyfe, Lori <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75070	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Pilot Instructor		Employer (See Instructions) Southwest Airlines

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fyfe, Lori <hr/> 6 Contributor address; City; State; Zip Code Mckinney, TX 75070	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Pilot Instructor		9 Employer (See Instructions) Southwest Airlines
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fyfe, Lori <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75070	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Pilot Instructor		Employer (See Instructions) Southwest Airlines
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fyfe, Lori <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75070	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Pilot Instructor		Employer (See Instructions) Southwest Airlines
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaiser, John <hr/> Contributor address; City; State; Zip Code Humble, TX 77339	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galiette, Joyce <hr/> Contributor address; City; State; Zip Code Missouri City, TX 77459	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gallatin, Deborah <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78727	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gallatin, Deborah <hr/> Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gallatin, Deborah <hr/> Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gallopodesta, Katherine <hr/> Contributor address; City; State; Zip Code Foster City, CA 94404	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GalvN, Irasema <hr/> Contributor address; City; State; Zip Code Dickinson, TX 77503	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GalvN, Irasema <hr/> 6 Contributor address; City; State; Zip Code Dickinson, TX 77503	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GalvN, Irasema <hr/> Contributor address; City; State; Zip Code Dickinson, TX 77503	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gandara, Nancy <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) N/A
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gandara, Nancy <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) N/A
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gandara, Nancy <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) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gantt, Melanie <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78704	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gantt, Melanie <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gantt, Melanie <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garahan, Barbara <hr/> Contributor address; City; State; Zip Code Dallas, TX 75254	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Anne <hr/> Contributor address; City; State; Zip Code Houston, TX 77021	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Attorney		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: 220/692 Rpt: 223/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Anne 6 Contributor address; City; State; Zip Code Houston, TX 77021	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self-Employed
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Anne Contributor address; City; State; Zip Code Houston, TX 77021	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-Employed
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Barbara Contributor address; City; State; Zip Code Mariposa, CA 95338	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Barbara Contributor address; City; State; Zip Code Mariposa, CA 95338	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Barbara Contributor address; City; State; Zip Code Mariposa, CA 95338	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 221/692 Rpt: 224/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Elaina <hr/> 6 Contributor address; City; State; Zip Code Cypress, TX 77429	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Private School
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Elaina <hr/> Contributor address; City; State; Zip Code Cypress, TX 77429	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Private School
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Elaina <hr/> Contributor address; City; State; Zip Code Cypress, TX 77429	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Private School
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Estella <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78239	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Gabriela <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Author		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: 222/692 Rpt: 225/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Gabriela <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78723	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Author		9 Employer (See Instructions) Self-Employed
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Renee <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Clinical Social Worker		Employer (See Instructions) Self-Employed
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Renee <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Clinical Social Worker		Employer (See Instructions) Self-Employed
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Renee <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Clinical Social Worker		Employer (See Instructions) Self-Employed
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Virginia <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 223/692 Rpt: 226/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gardner, Elizabeth 6 Contributor address; City; State; Zip Code Austin, TX 78727	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Paralegal		9 Employer (See Instructions) Texas Automobile Dealers Association
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gardner, Elizabeth Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Paralegal		Employer (See Instructions) Texas Automobile Dealers Association
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gardner, Sidney Contributor address; City; State; Zip Code Waxahachie, TX 75165	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Higher Education		Employer (See Instructions) Smu
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garner, Kathryn Contributor address; City; State; Zip Code Austin, TX 78735	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Allen Boone Humphries Robinson LI
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garner, Kathryn Contributor address; City; State; Zip Code Austin, TX 78735	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Allen Boone Humphries Robinson LI

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 224/692 Rpt: 227/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garner, Kathryn <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78735	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Allen Boone Humphries Robinson LI
Date 07/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garner, Kathryn <hr/> Contributor address; City; State; Zip Code Austin, TX 78735	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Allen Boone Humphries Robinson Llp
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garner, Kathryn <hr/> Contributor address; City; State; Zip Code Austin, TX 78735	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Allen Boone Humphries Robinson Llp
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garner, Kathryn <hr/> Contributor address; City; State; Zip Code Austin, TX 78735	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Allen Boone Humphries Robinson Llp
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garren, Melinda <hr/> Contributor address; City; State; Zip Code Houston, TX 77082	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 225/692 Rpt: 228/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrett, Karen <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77019	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrett, Karen <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrett, Karen <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrett, Karen <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrett, Karen <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 226/692 Rpt: 229/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrett, Karen <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77019	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrett, Karen <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrett, Karen <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrett, Karen <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrett, Karen <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 227/692 Rpt: 230/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrison, Donna <hr/> 6 Contributor address; City; State; Zip Code Briarcliff, TX 78669	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrison, Donna <hr/> Contributor address; City; State; Zip Code Briarcliff, TX 78669	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrison, Gina <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78230	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrison, Gina <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78230	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrison, Gina <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78230	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 228/692 Rpt: 231/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gartner, Catherine <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77057	7 Amount of Contribution (\$) \$55.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Self-Employed
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gartner, Kelly <hr/> Contributor address; City; State; Zip Code Houston, TX 77057	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Self-Employed		Employer (See Instructions) Self-Employed
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gayle, Nancy <hr/> Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Aal
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geleitsmann, Denise <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gemkow, Hollis <hr/> Contributor address; City; State; Zip Code Arlington Heights, IL 60004	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 229/692 Rpt: 232/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gentry, Carla <hr/> 6 Contributor address; City; State; Zip Code Lewisville, TX 75056	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gentry, Carla <hr/> Contributor address; City; State; Zip Code Lewisville, TX 75056	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gentry, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gentry, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gentry, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 230/692 Rpt: 233/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gentry, Karen <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78703	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gentry, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gentry, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gentry, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78703-1962	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gentry, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78703-1962	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 231/692 Rpt: 234/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) George, Karen <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77005	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Financial Consultant		9 Employer (See Instructions) Ralph S. O'Connor & Associates
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Germain, Emily <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) University Of Texas At Austin
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Germain, Emily <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) University Of Texas At Austin
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Germain, Emily <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) University Of Texas At Austin
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ghavidel, Kelly <hr/> Contributor address; City; State; Zip Code Katy, TX 77450	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 232/692 Rpt: 235/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ghiselin, Amy <hr/> 6 Contributor address; City; State; Zip Code Pearland, TX 77584	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ghiselin, Amy <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ghiselin, Amy <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giasson, Diane <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giasson, Diane <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 233/692 Rpt: 236/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giasson, Diane <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75230	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giasson, Diane <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giasson, Diane <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibbs, Lucy <hr/> Contributor address; City; State; Zip Code Austin, TX 78736	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibler, Dawn <hr/> Contributor address; City; State; Zip Code Willow City, TX 78675	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 234/692 Rpt: 237/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilbert, Anne 6 Contributor address; City; State; Zip Code Austin, TX 78739	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilbert, Linsey Contributor address; City; State; Zip Code Garland, TX 75043	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Garland Isd
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilbert, Linsey Contributor address; City; State; Zip Code Garland, TX 75043	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Garland Isd
Date 07/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gill, Cami Contributor address; City; State; Zip Code Leander, TX 78641	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilmore, Rhonda Contributor address; City; State; Zip Code El Lago, TX 77586	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 235/692 Rpt: 238/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilmore, Rhonda <hr/> 6 Contributor address; City; State; Zip Code El Lago, TX 77586	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilmore, Rhonda <hr/> Contributor address; City; State; Zip Code El Lago, TX 77586	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ginger, Victoria <hr/> Contributor address; City; State; Zip Code Cypress, TX 77429	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Girouard, Joy <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78231	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Sales Administrator		Employer (See Instructions) Asr Systems Inc.
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Girouard, Joy <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78231	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Sales Administrator		Employer (See Instructions) Asr Systems Inc.

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 236/692 Rpt: 239/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Girouard, Joy <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78231	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Sales Administrator		9 Employer (See Instructions) Asr Systems Inc.
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Girouard, Joy <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78231	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Sales Administrator		Employer (See Instructions) Asr Systems Inc.
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gobbo Jr, Edward <hr/> Contributor address; City; State; Zip Code Hammonton, NJ 08037	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gobbo Jr, Edward <hr/> Contributor address; City; State; Zip Code Hammonton, NJ 08037	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gobbo Jr, Edward <hr/> Contributor address; City; State; Zip Code Hammonton, NJ 08037	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gobbo Jr, Edward <hr/> 6 Contributor address; City; State; Zip Code Hammonton, NJ 08037	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gobbo Jr, Edward <hr/> Contributor address; City; State; Zip Code Hammonton, NJ 08037	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gobbo Jr, Edward <hr/> Contributor address; City; State; Zip Code Hammonton, NJ 08037	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gobbo Jr, Edward <hr/> Contributor address; City; State; Zip Code Hammonton, NJ 08037	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gobbo Jr, Edward <hr/> Contributor address; City; State; Zip Code Hammonton, NJ 08037	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gobbo Jr, Edward <hr/> 6 Contributor address; City; State; Zip Code Hammonton, NJ 08037	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gobbo Jr, Edward <hr/> Contributor address; City; State; Zip Code Hammonton, NJ 08037	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldblatt, Estelle <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Digital Artist		Employer (See Instructions) Self-Employed
Date 07/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldstein, Bridgette <hr/> Contributor address; City; State; Zip Code Mineral Wells, TX 76067	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Business Analyst		Employer (See Instructions) Self-Employed
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldstein, Bridgette <hr/> Contributor address; City; State; Zip Code Mineral Wells, TX 76067	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Business Analyst		Employer (See Instructions) Self-Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 239/692 Rpt: 242/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldstein, Bridgette 6 Contributor address; City; State; Zip Code Mineral Wells, TX 76067	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Business Analyst		9 Employer (See Instructions) Self-Employed
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldstein, Maurice Contributor address; City; State; Zip Code San Antonio, TX 78247	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldstein, Maurice Contributor address; City; State; Zip Code San Antonio, TX 78247	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Advantage Medical Supply Co.
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldwyn, Zelda Contributor address; City; State; Zip Code Mckinney, TX 75072	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Golshan, Karen Contributor address; City; State; Zip Code Austin, TX 78732	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gomez, April <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77095	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Administrative Assistant		9 Employer (See Instructions) Rei
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gomez, Laura <hr/> Contributor address; City; State; Zip Code Harlingen, TX 78552	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gomez, Laura <hr/> Contributor address; City; State; Zip Code Harlingen, TX 78552	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Instructor		Employer (See Instructions) South Texas College
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Deborah <hr/> Contributor address; City; State; Zip Code Houston Tx, TX 77005	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Deborah <hr/> Contributor address; City; State; Zip Code Houston Tx, TX 77005	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Elias <hr/> 6 Contributor address; City; State; Zip Code Leander, TX 78641	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Lawrence <hr/> Contributor address; City; State; Zip Code Austin, TX 78750	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Roxann <hr/> Contributor address; City; State; Zip Code Levelland, TX 79336	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Roxann <hr/> Contributor address; City; State; Zip Code Levelland, TX 79336	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Nancy <hr/> Contributor address; City; State; Zip Code Shavano Park, TX 78231	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Good, Patsy 6 Contributor address; City; State; Zip Code Schertz, TX 78154	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goode, Jan Contributor address; City; State; Zip Code La Jolla, CA 92037	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodfriend, Gary Contributor address; City; State; Zip Code Round Rock, TX 78681-1104	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodfriend, Gary Contributor address; City; State; Zip Code Round Rock, TX 78681-1104	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodfriend, Gary Contributor address; City; State; Zip Code Round Rock, TX 78681-1104	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodson, Paula <hr/> 6 Contributor address; City; State; Zip Code Buda, TX 78610	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodson, Paula <hr/> Contributor address; City; State; Zip Code Buda, TX 78610	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Bernice <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11201	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Heidi <hr/> Contributor address; City; State; Zip Code League City, TX 77573	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Heidi <hr/> Contributor address; City; State; Zip Code League City, TX 77573	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Heidi <hr/> 6 Contributor address; City; State; Zip Code League City, TX 77573	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Heidi <hr/> Contributor address; City; State; Zip Code League City, TX 77573	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Heidi <hr/> Contributor address; City; State; Zip Code League City, TX 77573	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Heidi <hr/> Contributor address; City; State; Zip Code League City, TX 77573	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Heidi <hr/> Contributor address; City; State; Zip Code League City, TX 77573	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Margie <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78757	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Academic Language Therapist		9 Employer (See Instructions) Self-Employed
Date 07/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gore, Laura <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions) Lone Star Bean
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gore, Laura <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions) Lone Star Bean
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gore, Laura <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions) Lone Star Bean
Date 07/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gosse, Thomas <hr/> Contributor address; City; State; Zip Code Magnolia, TX 77354	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self-Employed

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gosse, Thomas <hr/> 6 Contributor address; City; State; Zip Code Magnolia, TX 77354	7 Amount of Contribution (\$) \$7.50
8 Principal occupation / Job title (See Instructions) Self Employed		9 Employer (See Instructions) Self-Employed
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gosse, Thomas <hr/> Contributor address; City; State; Zip Code Magnolia, TX 77354	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self-Employed
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gosse, Thomas <hr/> Contributor address; City; State; Zip Code Magnolia, TX 77354	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self-Employed
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gosse, Thomas <hr/> Contributor address; City; State; Zip Code Magnolia, TX 77354	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self-Employed
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gosse, Thomas <hr/> Contributor address; City; State; Zip Code Magnolia, TX 77354	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self-Employed

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gosse, Thomas <hr/> 6 Contributor address; City; State; Zip Code Magnolia, TX 77354	7 Amount of Contribution (\$) \$7.50
8 Principal occupation / Job title (See Instructions) Self Employed		9 Employer (See Instructions) Self-Employed
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gosse, Thomas <hr/> Contributor address; City; State; Zip Code Magnolia, TX 77354	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self-Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gottlieb, Amy <hr/> Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gottlieb, Amy <hr/> Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gottlieb, Amy <hr/> Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graber, Laura <hr/> 6 Contributor address; City; State; Zip Code Cypress, TX 77429	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Legal Assistant		9 Employer (See Instructions) Fish
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graber, Laura <hr/> Contributor address; City; State; Zip Code Cypress, TX 77429	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Legal Assistant		Employer (See Instructions) Fish
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graber, Laura <hr/> Contributor address; City; State; Zip Code Cypress, TX 77429	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Legal Assistant		Employer (See Instructions) Fish
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gradford, Judy <hr/> Contributor address; City; State; Zip Code Austin, TX 78744	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gradford, Judy <hr/> Contributor address; City; State; Zip Code Austin, TX 78744	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gradford, Judy <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78744	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gradford, Judy <hr/> Contributor address; City; State; Zip Code Austin, TX 78744	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gradford, Judy <hr/> Contributor address; City; State; Zip Code Austin, TX 78744	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grady, Tarma <hr/> Contributor address; City; State; Zip Code Austin, TX 78750	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graham, Lee <hr/> Contributor address; City; State; Zip Code Galveston, TX 77554-9660	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 250/692 Rpt: 253/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graham, Martha <hr/> 6 Contributor address; City; State; Zip Code Plano, TX 75023-3917	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Therapist		9 Employer (See Instructions) Meadows Behavioral Health
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Granberry, Claire <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grau, Peggy <hr/> Contributor address; City; State; Zip Code Irvine, CA 92617	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Scpmg
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grau, Peggy <hr/> Contributor address; City; State; Zip Code Irvine, CA 92617	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Scpmg
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grau, Peggy <hr/> Contributor address; City; State; Zip Code Irvine, CA 92617	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Scpmg

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 251/692 Rpt: 254/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grau, Peggy <hr/> 6 Contributor address; City; State; Zip Code Irvine, CA 92617	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Scpmg
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grau, Peggy <hr/> Contributor address; City; State; Zip Code Irvine, CA 92617	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Scpmg
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grau, Peggy <hr/> Contributor address; City; State; Zip Code Irvine, CA 92617	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Scpmg
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grau, Peggy <hr/> Contributor address; City; State; Zip Code Irvine, CA 92617	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Scpmg
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grau, Peggy <hr/> Contributor address; City; State; Zip Code Irvine, CA 92617	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Scpmg

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 252/692 Rpt: 255/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graves, Diane <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78731-1538	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Tai Chi Teacher		9 Employer (See Instructions) Self-Employed
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graves, Diane <hr/> Contributor address; City; State; Zip Code Austin, TX 78731-1538	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Tai Chi Teacher		Employer (See Instructions) Self-Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray, Billy <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self-Employed
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray, Billy <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self-Employed
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray, Billy <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self-Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 253/692 Rpt: 256/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenberg, Jo-Sandra <hr/> 6 Contributor address; City; State; Zip Code Garland, TX 75044	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greer, Janice <hr/> Contributor address; City; State; Zip Code Garland, TX 75044	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greer, Janice <hr/> Contributor address; City; State; Zip Code Garland, TX 75044	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greer, Janice <hr/> Contributor address; City; State; Zip Code Garland, TX 75044	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregg, Ken <hr/> Contributor address; City; State; Zip Code Bellaire, TX 77401	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 254/692 Rpt: 257/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregory, James <hr/> 6 Contributor address; City; State; Zip Code Dublin, OK 43016	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions) Gdt
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregory, James <hr/> Contributor address; City; State; Zip Code Dublin, OK 43016	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Gdt
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregory, James <hr/> Contributor address; City; State; Zip Code Dublin, OK 43016	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Gdt
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greiner, Elizabeth <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gresham, Lesley <hr/> Contributor address; City; State; Zip Code Fulshear, TX 77441	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 255/692 Rpt: 258/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Adele <hr/> 6 Contributor address; City; State; Zip Code Carlsbad, CA 92009	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Adele <hr/> Contributor address; City; State; Zip Code Carlsbad, CA 92009	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Adele <hr/> Contributor address; City; State; Zip Code Carlsbad, CA 92009	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grijalva, Nichole <hr/> Contributor address; City; State; Zip Code Killeen, TX 76549	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Rapid Response Team Specialist		Employer (See Instructions) Groups Recover Together
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grijalva, Nichole <hr/> Contributor address; City; State; Zip Code Killeen, TX 76549	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Rapid Response Team Specialist		Employer (See Instructions) Groups Recover Together

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 256/692 Rpt: 259/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grimes, Melissa <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79410	7 Amount of Contribution (\$) \$80.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grimes, Melissa <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79410	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Melissa Grimes
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grimes, Melissa <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79410	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Melissa Grimes
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grimes, Michelle <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grimes, Michelle <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Physician Assistant		Employer (See Instructions) Austin Ent

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 257/692 Rpt: 260/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Groshardt, Joanne <hr/> 6 Contributor address; City; State; Zip Code Richardson, TX 75081	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Groshardt, Joanne <hr/> Contributor address; City; State; Zip Code Richardson, TX 75081	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Groshardt, Joanne <hr/> Contributor address; City; State; Zip Code Richardson, TX 75081	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grothues, Arnold <hr/> Contributor address; City; State; Zip Code Arlington, TX 76001-7554	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grothues, Arnold <hr/> Contributor address; City; State; Zip Code Arlington, TX 76001-7554	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 258/692 Rpt: 261/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grothues, Arnold <hr/> 6 Contributor address; City; State; Zip Code Arlington, TX 76001-7554	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grothues, Arnold <hr/> Contributor address; City; State; Zip Code Arlington, TX 76001-7554	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grove, Stephen <hr/> Contributor address; City; State; Zip Code Houston, TX 77077	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grove, Steve <hr/> Contributor address; City; State; Zip Code Houston, TX 77077	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Cadd Designer		Employer (See Instructions) Civilcorp Llc
Date 07/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gu, David <hr/> Contributor address; City; State; Zip Code Portland, OR 97239	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Orthodontist		Employer (See Instructions) Interdent

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 259/692 Rpt: 262/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guenther, Nancy Fly <hr/> 6 Contributor address; City; State; Zip Code Harlingen, TX 78552	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guereca, Angelia <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78413	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gumpert, Cindy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75228	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Andrea <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$48.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Jennifer <hr/> Contributor address; City; State; Zip Code Dripping Spgs, TX 78620	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 260/692 Rpt: 263/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Margo <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78745	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guttormson, Jenny <hr/> Contributor address; City; State; Zip Code Leander, TX 78641	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) H Johnston, Clyde <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76087	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hackett, Joyce <hr/> Contributor address; City; State; Zip Code Granbury, TX 76049	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Cashier		Employer (See Instructions) H-E-B
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hackler, Norma <hr/> Contributor address; City; State; Zip Code Austin, TX 78739	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 261/692 Rpt: 264/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hackler, Norma <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78739	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haden, Lorri <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) N/A
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haden, Lorri <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) N/A
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haden, Lorri <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) N/A
Date 07/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hagan, Kate <hr/> Contributor address; City; State; Zip Code Houston, TX 77025	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Anesthesiologist		Employer (See Instructions) Md Anderson

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 262/692 Rpt: 265/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hagan, Kate <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77025	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Anesthesiologist		9 Employer (See Instructions) Md Anderson
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hagan, Kate <hr/> Contributor address; City; State; Zip Code Houston, TX 77025	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Anesthesiologist		Employer (See Instructions) Md Anderson
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hagemeister, F B <hr/> Contributor address; City; State; Zip Code Houston, TX 77025	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Mdanderson
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hale, Abigail <hr/> Contributor address; City; State; Zip Code Barton, VT 05822	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Halff, Danna <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Legislative Aide		Employer (See Instructions) State Of Texas

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 263/692 Rpt: 266/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Camille <hr/> 6 Contributor address; City; State; Zip Code Galveston, TX 77551	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Camille <hr/> Contributor address; City; State; Zip Code Galveston, TX 77551	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Camille <hr/> Contributor address; City; State; Zip Code Galveston, TX 77551	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Debbie <hr/> Contributor address; City; State; Zip Code Austin, TX 78739	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Jeanette <hr/> Contributor address; City; State; Zip Code Fairfax, CA 94930	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Jeanette

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 264/692 Rpt: 267/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Jeanette <hr/> 6 Contributor address; City; State; Zip Code Fairfax, CA 94930	7 Amount of Contribution (\$) \$240.00
8 Principal occupation / Job title (See Instructions) Accountant		9 Employer (See Instructions) Jeanette
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Jennifer <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78244	Amount of Contribution (\$) \$69.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Linda <hr/> Contributor address; City; State; Zip Code Plano, TX 75023	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Linda <hr/> Contributor address; City; State; Zip Code Plano, TX 75023	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Linda <hr/> Contributor address; City; State; Zip Code Plano, TX 75023	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 265/692 Rpt: 268/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Nancy <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78628	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Susan <hr/> Contributor address; City; State; Zip Code Dallas, TX 75244	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Theresa <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Ride Share Driver		Employer (See Instructions) Self-Employed
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hameline, Elizabeth <hr/> Contributor address; City; State; Zip Code Irving, TX 75038	Amount of Contribution (\$) \$90.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamlin, Cynthia <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 266/692 Rpt: 269/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamm, Mary <hr/> 6 Contributor address; City; State; Zip Code Porter, TX 77365	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Ombudsman		9 Employer (See Instructions) Oiec
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hammond, Steven <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75070	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hand, Dorcas <hr/> Contributor address; City; State; Zip Code Houston, TX 77008	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) Aos
Date 07/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hand, Dorcas <hr/> Contributor address; City; State; Zip Code Houston, TX 77008	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) Aos
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hand, Dorcas <hr/> Contributor address; City; State; Zip Code Houston, TX 77008	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) Aos

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 267/692 Rpt: 270/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanks, Margaret <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78748	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanna, Whitney <hr/> Contributor address; City; State; Zip Code Houston, TX 77018-5312	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) Tntp
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanna, Whitney <hr/> Contributor address; City; State; Zip Code Houston, TX 77018-5312	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) Tntp
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanna, Whitney <hr/> Contributor address; City; State; Zip Code Houston, TX 77018-5312	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) Tntp
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hans, Carol <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 268/692 Rpt: 271/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanschen, Allison <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78724	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Slp		9 Employer (See Instructions) Hca
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hansen, Debra <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hansen, Jennifer <hr/> Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Safe Network Solutions
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haraway, Erin <hr/> Contributor address; City; State; Zip Code Austin, TX 78730	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Hyperbaric Medical Consultants Pa
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hardacker, Hazel <hr/> Contributor address; City; State; Zip Code Austin, TX 78730	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Self-Employed

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hardin, Glennda <hr/> 6 Contributor address; City; State; Zip Code Liberty, TX 77575	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hardin, Glennda <hr/> Contributor address; City; State; Zip Code Liberty, TX 77575	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harding, Emily <hr/> Contributor address; City; State; Zip Code Argyle, TX 76226	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harding, Russell <hr/> Contributor address; City; State; Zip Code Sunset Valley, TX 78745	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harland, Donald <hr/> Contributor address; City; State; Zip Code Candler, NC 28715	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Hospital

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harland, Donald <hr/> 6 Contributor address; City; State; Zip Code Candler, NC 28715	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Nurse		9 Employer (See Instructions) Hospital
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harland, Donald <hr/> Contributor address; City; State; Zip Code Candler, NC 28715	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Hospital
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harmse, Jorgen <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Data Scientist		Employer (See Instructions) Roku
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harper, Kate <hr/> Contributor address; City; State; Zip Code Austin, TX 78754	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Managet		Employer (See Instructions) Pearson
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Linda <hr/> Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self-Employed

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, John <hr/> 6 Contributor address; City; State; Zip Code Palacios, TX 77465	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harsdorff, Sarah <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harsdorff, Sarah <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hart, Emily <hr/> Contributor address; City; State; Zip Code Spring, TX 77379	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hart, Julianne <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Austin Isd

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 272/692 Rpt: 275/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hart, Julianne <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78723	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Product Marketing Manager		9 Employer (See Instructions) Microsoft
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hart, Julianne <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Product Marketing Manager		Employer (See Instructions) Microsoft
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hart, Julianne <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Product Marketing Manager		Employer (See Instructions) Microsoft
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hart, Sari <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78626	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hart, Sharon T <hr/> Contributor address; City; State; Zip Code Conroe, TX 77384	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hart, Sheva <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78626	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harte, Sarah <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78212	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Personal Business		Employer (See Instructions) Self-Employed
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartry, Allison <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartsough, Larry <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94705	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Technical Consultant		Employer (See Instructions) Self-Employed
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartsough, Larry <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94705	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Technical Consultant		Employer (See Instructions) Self-Employed

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartsough, Larry 6 Contributor address; City; State; Zip Code Berkeley, CA 94705	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Technical Consultant		9 Employer (See Instructions) Self-Employed
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haskins, Madeleine Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haskins, Madeleine Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hausmann, Se Contributor address; City; State; Zip Code Austin, TX 78702	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Havard, Kristy Contributor address; City; State; Zip Code La Porte, TX 77571	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Deer Park Isd

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 275/692 Rpt: 278/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Havard, Kristy <hr/> 6 Contributor address; City; State; Zip Code La Porte, TX 77571	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Educator		9 Employer (See Instructions) Deer Park Isd
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Havard, Kristy <hr/> Contributor address; City; State; Zip Code La Porte, TX 77571	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Deer Park Isd
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawes, Catherine <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawes, Catherine <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawes, Catherine <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 276/692 Rpt: 279/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawes, Catherine <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78633	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 07/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayduck, Sara <hr/> Contributor address; City; State; Zip Code Villa Park, IL 60181	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/09/2024	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) Data Engineer		Employer (See Instructions) Dell Technologies
Date 08/09/2024	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) Data Engineer		Employer (See Instructions) Dell Technologies
Date 09/09/2024	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) Data Engineer		Employer (See Instructions) Dell Technologies

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 277/692 Rpt: 280/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hays, Emily <hr/> 6 Contributor address; City; State; Zip Code Roanoke, TX 76262	7 Amount of Contribution (\$) \$6.55
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Head, Amanda <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78232	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heap, Susan <hr/> Contributor address; City; State; Zip Code Hurst, TX 76054	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heath, Ginger <hr/> Contributor address; City; State; Zip Code Carmine, TX 78932	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heath, Ginger <hr/> Contributor address; City; State; Zip Code Carmine, TX 78932	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heath, Ginger <hr/> 6 Contributor address; City; State; Zip Code Carmine, TX 78932	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hebley, Sandi <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Faith Oresbyterian Hospice
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hebley, Sandi <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Faith Oresbyterian Hospice
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hebley, Sandi <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Faith Oresbyterian Hospice
Date 07/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hebley, Sandi <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Faith Presbyterian Hospice

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 279/692 Rpt: 282/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hebley, Sandi <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75230	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RN		9 Employer (See Instructions) Faith Presbyterian Hospice
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hebley, Sandi <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Faith Presbyterian Hospice
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heidbrink, Samantha <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heine, Rita <hr/> Contributor address; City; State; Zip Code San Jose, CA 95125	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Meta
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heldenfels, Holly <hr/> Contributor address; City; State; Zip Code Austin, TX 78754	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 280/692 Rpt: 283/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henley, Donald <hr/> 6 Contributor address; City; State; Zip Code Charlottesville, VA 22903	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Musician/Performer		9 Employer (See Instructions) Self-Employed
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henley, Donald <hr/> Contributor address; City; State; Zip Code Charlottesville, VA 22903	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Musician/Performer		Employer (See Instructions) Self-Employed
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henley, Donald <hr/> Contributor address; City; State; Zip Code Charlottesville, VA 22903	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Professional Musician		Employer (See Instructions) Self-Employed
Date 07/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henley, Donald <hr/> Contributor address; City; State; Zip Code Charlottesville, VA 22903	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Recording Artist		Employer (See Instructions) Self-Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henley, Mary Kay <hr/> Contributor address; City; State; Zip Code Dallas, TX 75206	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) Henley & Henleyp.C.

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 281/692 Rpt: 284/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henly, Sally <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78731	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henly, Sally <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henly, Sally <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henry, Julianne <hr/> Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henry, Julianne <hr/> Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 282/692 Rpt: 285/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henry, Julianne <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77055	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henry, Julie <hr/> Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Sbisd
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henry, Julie <hr/> Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Sbisd
Date 08/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henry, Julie <hr/> Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Sbisd
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henry, Julie <hr/> Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Sbisd

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 283/692 Rpt: 286/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henry, Julie <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77055	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Sbisd
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henry, Julie <hr/> Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Sbisd
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henschen, Robert J <hr/> Contributor address; City; State; Zip Code Bellaire, TX 77401-2815	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hensleigh, Louise <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76108	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Medical Protective
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henson, Abigail <hr/> Contributor address; City; State; Zip Code Houston, TX 77009	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Management Consultant		Employer (See Instructions) Protiviti Inc.

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 284/692 Rpt: 287/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henson, Abigail <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77009	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Management Consultant		9 Employer (See Instructions) Protiviti Inc.
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henson, Abigail <hr/> Contributor address; City; State; Zip Code Houston, TX 77009	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Management Consultant		Employer (See Instructions) Protiviti Inc.
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Christina <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78201	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Legal Assistant		Employer (See Instructions) Caldwell East
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Joann <hr/> Contributor address; City; State; Zip Code Austin, TX 78747	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Lisa <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78407	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 285/692 Rpt: 288/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hersman, Nancy <hr/> 6 Contributor address; City; State; Zip Code Parker, CO 80134	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Self-Employed
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hiatt, Susan <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hickey, Alexandra <hr/> Contributor address; City; State; Zip Code Austin, TX 78739	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hicks, Lane <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Fuse Architecture Studio
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hicks, Lane <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Fuse Architecture Studio

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 286/692 Rpt: 289/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hicks, Lane <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78723	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Architect		9 Employer (See Instructions) Fuse Architecture Studio
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) High, Margaret <hr/> Contributor address; City; State; Zip Code Denton, TX 76209	Amount of Contribution (\$) \$9.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilbig, Deborah <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilderman, Julee <hr/> Contributor address; City; State; Zip Code Houston, TX 77035	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilderman, Julee <hr/> Contributor address; City; State; Zip Code Houston, TX 77035	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 287/692 Rpt: 290/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Beverly <hr/> 6 Contributor address; City; State; Zip Code Euless, TX 76039-4047	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Janet <hr/> Contributor address; City; State; Zip Code Houston, TX 77009	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill Jones, Darla <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill Jones, Darla <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill Jones, Darla <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 288/692 Rpt: 291/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillen, Cynthia 6 Contributor address; City; State; Zip Code Houston, TX 77007	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hiller, Jay Contributor address; City; State; Zip Code Austin, TX 78726	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Yoga Instructor		Employer (See Instructions) Lasr
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillhouse, Martha Contributor address; City; State; Zip Code Alvin, TX 77511	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Account Manager		Employer (See Instructions) Kloeckner Metals
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillhouse, Martha Contributor address; City; State; Zip Code Alvin, TX 77511	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Account Manager		Employer (See Instructions) Kloeckner Metals
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillhouse, Martha Contributor address; City; State; Zip Code Alvin, TX 77511	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Account Manager		Employer (See Instructions) Kloeckner Metals

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 289/692 Rpt: 292/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hinojosa, Nancy <hr/> 6 Contributor address; City; State; Zip Code Richardson, TX 75080	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Buyer		9 Employer (See Instructions) Culwell & Son
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hirsch, Glenn <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$21.55
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hitt, Laura <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hobratschk, Martin <hr/> Contributor address; City; State; Zip Code Austin, TX 78754	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Program Manager		Employer (See Instructions) Google
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hobratschk, Martin <hr/> Contributor address; City; State; Zip Code Austin, TX 78754	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Program Manager		Employer (See Instructions) Google

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 290/692 Rpt: 293/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hobratschk, Martin 6 Contributor address; City; State; Zip Code Austin, TX 78754	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Program Manager		9 Employer (See Instructions) Google
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hodge, Mary Contributor address; City; State; Zip Code Frisco, TX 75036	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hodgin, Kathy Contributor address; City; State; Zip Code Dallas, TX 75208	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Cosmetologist		Employer (See Instructions) Salon On The Square
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoelting, Anna Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoffman, Mary Contributor address; City; State; Zip Code Houston, TX 77027	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 291/692 Rpt: 294/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoge, Kathryn <hr/> 6 Contributor address; City; State; Zip Code Norcross, GA 30092	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions) Abg
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollas, Deanna <hr/> Contributor address; City; State; Zip Code Dallas, TX 75218	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Gvp Ministry Coordinator		Employer (See Instructions) Presbyterian Peace Fellowship
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollas, Deanna <hr/> Contributor address; City; State; Zip Code Dallas, TX 75218	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Gvp Ministry Coordinator		Employer (See Instructions) Presbyterian Peace Fellowship
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollas, Deanna <hr/> Contributor address; City; State; Zip Code Dallas, TX 75218	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Gvp Ministry Coordinator		Employer (See Instructions) Presbyterian Peace Fellowship
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollingsworth, Desiree <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Hibiscus Imports

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 292/692 Rpt: 295/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollingsworth, Desiree 6 Contributor address; City; State; Zip Code Austin, TX 78746	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Business Owner		9 Employer (See Instructions) Hibiscus Imports
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holloway, Karla Contributor address; City; State; Zip Code Cedar Park, TX 78613-7130	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holloway, Karla Contributor address; City; State; Zip Code Cedar Park, TX 78613-7130	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holly, Karyn Contributor address; City; State; Zip Code Dallas, TX 75240	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holly, Karyn Contributor address; City; State; Zip Code Dallas, TX 75240	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 293/692 Rpt: 296/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holman, Jessica <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79423	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Responsive Ed
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, Janet <hr/> Contributor address; City; State; Zip Code Castroville, TX 78009	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, Janet <hr/> Contributor address; City; State; Zip Code Castroville, TX 78009	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, Janet <hr/> Contributor address; City; State; Zip Code Castroville, TX 78009	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoover, Kimberly <hr/> Contributor address; City; State; Zip Code Miami, FL 33131	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) Red Multifamily

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 294/692 Rpt: 297/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoover, Kimberly <hr/> 6 Contributor address; City; State; Zip Code Miami, FL 33131	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Investor		9 Employer (See Instructions) Red Multifamily
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoover, Kimberly <hr/> Contributor address; City; State; Zip Code Miami, FL 33131	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) Red Multifamily
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hope, Holly <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horgan, Warren <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76179	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horn, Susan <hr/> Contributor address; City; State; Zip Code Spicewood, TX 78669	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 295/692 Rpt: 298/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hornick, Denise <hr/> 6 Contributor address; City; State; Zip Code Humble, TX 77936	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horning, Phyllis <hr/> Contributor address; City; State; Zip Code Port Huron, MI 48060	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horning, Phyllis <hr/> Contributor address; City; State; Zip Code Port Huron, MI 48060	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horning, Phyllis <hr/> Contributor address; City; State; Zip Code Port Huron, MI 48060	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horwitz, Ilona <hr/> Contributor address; City; State; Zip Code Denver, CO 80220	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 296/692 Rpt: 299/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houck, Marcia <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77062	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houck, Marcia <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houston, Wanda <hr/> Contributor address; City; State; Zip Code Hewitt, TX 76643	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hover, Joy <hr/> Contributor address; City; State; Zip Code Cedar Hill, TX 75104	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Kristi <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78248	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 297/692 Rpt: 300/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Kristi <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78248	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Kristi <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78248	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Linda <hr/> Contributor address; City; State; Zip Code Belen, NM 87002	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howell, Barbara <hr/> Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howell, Melissa <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 298/692 Rpt: 301/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howell, Stephanie <hr/> 6 Contributor address; City; State; Zip Code Coppell, TX 75019	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howley, Robyn <hr/> Contributor address; City; State; Zip Code Spring, TX 77389	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Geologist		Employer (See Instructions) Freelance
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howley, Robyn <hr/> Contributor address; City; State; Zip Code Spring, TX 77389	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Geologist		Employer (See Instructions) Freelance
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hudson, Constance <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huffman, Linda <hr/> Contributor address; City; State; Zip Code Palm Beach Gardens, FL 33418	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self-Employed

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughes, Rebecca <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76116	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughes, Teresa <hr/> Contributor address; City; State; Zip Code Searcy, AR 72143	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hugley, Brantyn <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Graduate Assistant		Employer (See Instructions) Texas State University
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hulse, Anna <hr/> Contributor address; City; State; Zip Code Plano, TX 75023	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Marketing Assistant		Employer (See Instructions) Service Experts
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hulse, Anna <hr/> Contributor address; City; State; Zip Code Plano, TX 75023	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Marketing Assistant		Employer (See Instructions) Service Experts

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 300/692 Rpt: 303/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hulse, Anna <hr/> 6 Contributor address; City; State; Zip Code Plano, TX 75023	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Marketing Assistant		9 Employer (See Instructions) Service Experts
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Jennifer <hr/> Contributor address; City; State; Zip Code Garland, TX 75044	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Worldwide Mission Critical. Llc
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Meta <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, William <hr/> Contributor address; City; State; Zip Code Fort Lauderdale, FL 33306	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, William <hr/> Contributor address; City; State; Zip Code Fort Lauderdale, FL 33306	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunter, Candace <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78723	7 Amount of Contribution (\$) \$70.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunter, Candace <hr/> Contributor address; City; State; Zip Code Austin, TX 78723-1806	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Acc
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huntsman, Dana <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Speech Language Pathologist		Employer (See Instructions) Leander Isd
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hurley, Christine <hr/> Contributor address; City; State; Zip Code Houston, TX 77077	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huschle, Mary <hr/> Contributor address; City; State; Zip Code Garland, TX 75044	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Garland Isd

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huschle, Mary <hr/> 6 Contributor address; City; State; Zip Code Garland, TX 75044	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Garland Isd
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huschle, Mary <hr/> Contributor address; City; State; Zip Code Garland, TX 75044	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Garland Isd
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutson, Jennifer <hr/> Contributor address; City; State; Zip Code Aledo, TX 76008	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Merchandise		Employer (See Instructions) Jennifer Hutson
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Iglesias, Denise <hr/> Contributor address; City; State; Zip Code Austin, TX 78730	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ioakimedes, Stacey <hr/> Contributor address; City; State; Zip Code Wills Point, TX 75169	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) loakimedes, Stacey <hr/> 6 Contributor address; City; State; Zip Code Wills Point, TX 75169	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Nurse		9 Employer (See Instructions) Oec
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Irby, Luise <hr/> Contributor address; City; State; Zip Code Dale, TX 78616	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Irby, Luise <hr/> Contributor address; City; State; Zip Code Dale, TX 78616	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Irwin, Karen <hr/> Contributor address; City; State; Zip Code El Paso, TX 79928	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ivy, Darwyn <hr/> Contributor address; City; State; Zip Code Austin, TX 78704-4547	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 304/692 Rpt: 307/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ivy, Darwyn <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78704-4547	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ivy, Darwyn <hr/> Contributor address; City; State; Zip Code Austin, TX 78704-4547	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ivy, Darwyn <hr/> Contributor address; City; State; Zip Code Austin, TX 78704-4547	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ivy, Darwyn <hr/> Contributor address; City; State; Zip Code Austin, TX 78704-4547	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Lyn <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79413	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Higher Education		Employer (See Instructions) Texas Tech

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Lyn <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79413	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Director Of Finance		9 Employer (See Instructions) Texas Tech University
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Wanda <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78227	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Wanda <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78227	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Customer Care		Employer (See Instructions) Qvc
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Jo <hr/> Contributor address; City; State; Zip Code Stephenville, TX 76401	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Sarah <hr/> Contributor address; City; State; Zip Code Prosper, TX 75078	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Slp		Employer (See Instructions) Self-Employed

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Sarah <hr/> 6 Contributor address; City; State; Zip Code Prosper, TX 75078	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Slp		9 Employer (See Instructions) Self-Employed
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Sarah <hr/> Contributor address; City; State; Zip Code Prosper, TX 75078	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Slp		Employer (See Instructions) Self-Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Janes, Robert <hr/> Contributor address; City; State; Zip Code Austin, TX 78722	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jankowski, Olga <hr/> Contributor address; City; State; Zip Code Houston, TX 77077	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenkins, Brenda <hr/> Contributor address; City; State; Zip Code Nolensville, TN 37135	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 307/692 Rpt: 310/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenkins, Brenda <hr/> 6 Contributor address; City; State; Zip Code Nolensville, TN 37135	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenkins, Brenda <hr/> Contributor address; City; State; Zip Code Nolensville, TN 37135	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenkins, Joni <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77479	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Engie
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenkins, Joni <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77479	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Case Manager		Employer (See Instructions) Oakbend
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenkins, Joni <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77479	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Case Manager		Employer (See Instructions) Oakbend

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenkins, Joni <hr/> 6 Contributor address; City; State; Zip Code Sugar Land, TX 77479	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Nurse		9 Employer (See Instructions) Oakbend
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenkins, Melissa <hr/> Contributor address; City; State; Zip Code Burleson, TX 76028	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jennings, Debbie <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78231	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jensen, Ann <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Instructional Designer		Employer (See Instructions) Tx State University
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jensen, Jane <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 309/692 Rpt: 312/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jensen, Jane 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jensen, Jane Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jensen, Richard Contributor address; City; State; Zip Code Dripping Springs, TX 78620	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jiles, Anita Contributor address; City; State; Zip Code Lago Vista, TX 78645	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Self-Employed
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jimenez, Dannette Contributor address; City; State; Zip Code Mineral Wells, TX 76067	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 310/692 Rpt: 313/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jimenez, Dannette <hr/> 6 Contributor address; City; State; Zip Code Mineral Wells, TX 76067	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joelson, Leah <hr/> Contributor address; City; State; Zip Code Dallas, TX 75204	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Contractor/Education		Employer (See Instructions) Lexia
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joelson, Leah <hr/> Contributor address; City; State; Zip Code Dallas, TX 75204	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Contractor/Education		Employer (See Instructions) Lexia
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joelson, Leah <hr/> Contributor address; City; State; Zip Code Dallas, TX 75204	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Contractor/Education		Employer (See Instructions) Lexia
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Anne <hr/> Contributor address; City; State; Zip Code Mesquite, TX 75149	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 311/692 Rpt: 314/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Anne <hr/> 6 Contributor address; City; State; Zip Code Mesquite, TX 75149	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Anne <hr/> Contributor address; City; State; Zip Code Mesquite, TX 75149	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Anne <hr/> Contributor address; City; State; Zip Code Mesquite, TX 75149	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Anne <hr/> Contributor address; City; State; Zip Code Mesquite, TX 75149	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Anne <hr/> Contributor address; City; State; Zip Code Mesquite, TX 75149	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 312/692 Rpt: 315/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Anne 6 Contributor address; City; State; Zip Code Mesquite, TX 75149	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Anne Contributor address; City; State; Zip Code Mesquite, TX 75149	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Anne Contributor address; City; State; Zip Code Mesquite, TX 75149	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Anne Contributor address; City; State; Zip Code Mesquite, TX 75149	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Anne Contributor address; City; State; Zip Code Mesquite, TX 75149	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 313/692 Rpt: 316/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Anne <hr/> 6 Contributor address; City; State; Zip Code Mesquite, TX 75149	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Anne <hr/> Contributor address; City; State; Zip Code Mesquite, TX 75149	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Anne <hr/> Contributor address; City; State; Zip Code Mesquite, TX 75149	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Christine <hr/> Contributor address; City; State; Zip Code Josephine, TX 75189	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Hca
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Eileen <hr/> Contributor address; City; State; Zip Code Austin, TX 78758	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Counselor		Employer (See Instructions) Self-Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 314/692 Rpt: 317/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Eileen <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78758	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Counselor		9 Employer (See Instructions) Self-Employed
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Heather <hr/> Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$90.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Kelly <hr/> Contributor address; City; State; Zip Code Alexandria, VA 22314	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Coach		Employer (See Instructions) Kelly Johnson
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, R M <hr/> Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, R M <hr/> Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 315/692 Rpt: 318/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, R M <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78727	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, R M <hr/> Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Rebecca <hr/> Contributor address; City; State; Zip Code Garland, TX 75044	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Rebecca <hr/> Contributor address; City; State; Zip Code Garland, TX 75044	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Activity Director		Employer (See Instructions) Watermark Senior Living
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnston, Gayle <hr/> Contributor address; City; State; Zip Code Napa, CA 94558	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 316/692 Rpt: 319/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnston, Leanne <hr/> 6 Contributor address; City; State; Zip Code Reno, TX 75462	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Customer Care		9 Employer (See Instructions) Let'S Dabble
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnston, Leanne <hr/> Contributor address; City; State; Zip Code Reno, TX 75462	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Customer Care		Employer (See Instructions) Let'S Dabble
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnston, Leanne <hr/> Contributor address; City; State; Zip Code Reno, TX 75462	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Customer Care		Employer (See Instructions) Let'S Dabble
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Bobbi <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Apts
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Bobbi <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Apts

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 317/692 Rpt: 320/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Bobbi <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78757	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) Apts
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Carl <hr/> Contributor address; City; State; Zip Code Spicewood, TX 78669	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Carl <hr/> Contributor address; City; State; Zip Code Spicewood, TX 78669	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Carl <hr/> Contributor address; City; State; Zip Code Spicewood, TX 78669	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, James <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78665	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 318/692 Rpt: 321/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Kathryn <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78210	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Lynne <hr/> Contributor address; City; State; Zip Code Missouri City, TX 77459	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Interior Designer		Employer (See Instructions) Lynne T Jones Interior Design
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Lynne <hr/> Contributor address; City; State; Zip Code Missouri City, TX 77459	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Interior Designer		Employer (See Instructions) Lynne T Jones Interior Design
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Lynne <hr/> Contributor address; City; State; Zip Code Missouri City, TX 77459	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Interior Designer		Employer (See Instructions) Lynne T Jones Interior Design
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Lynne <hr/> Contributor address; City; State; Zip Code Missouri City, TX 77459	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Interior Designer		Employer (See Instructions) Lynne T Jones Interior Design

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 319/692 Rpt: 322/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Lynne <hr/> 6 Contributor address; City; State; Zip Code Missouri City, TX 77459	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Interior Designer		9 Employer (See Instructions) Lynne T Jones Interior Design
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Melissa <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Melissa <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Melissa <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Melissa <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 320/692 Rpt: 323/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Nancy 6 Contributor address; City; State; Zip Code Dallas, TX 75205	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Nancy Contributor address; City; State; Zip Code Dallas, TX 75205	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Valerie Contributor address; City; State; Zip Code Coppell, TX 75019	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Oracle America Inc
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones Iii, Henry Contributor address; City; State; Zip Code Houston, TX 77077	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jordan, Patricia Contributor address; City; State; Zip Code Dallas, TX 75238	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 321/692 Rpt: 324/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jordan, Patricia <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75238	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jordan, Patricia <hr/> Contributor address; City; State; Zip Code Dallas, TX 75238	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jordan, Theresa Diane <hr/> Contributor address; City; State; Zip Code Mesquite, TX 75149	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joy, Louise <hr/> Contributor address; City; State; Zip Code Austin, TX 78737	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Joy & Young Llp
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Juengerman, Kathryn <hr/> Contributor address; City; State; Zip Code Hurst, TX 78053	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 322/692 Rpt: 325/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Julien, Jacqueline 6 Contributor address; City; State; Zip Code Texarkana, TX 75503	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Road Trip Wave
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Juniper, Cynthia Contributor address; City; State; Zip Code Wimberley, TX 78676	Amount of Contribution (\$) \$21.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kahle, Jennifer Contributor address; City; State; Zip Code Austin, TX 78754	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kahn, Beverly Contributor address; City; State; Zip Code Texarkana, TX 75503	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kahn, Beverly Contributor address; City; State; Zip Code Texarkana, TX 75503	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 323/692 Rpt: 326/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kai, Judith <hr/> 6 Contributor address; City; State; Zip Code Round Rock, TX 78664	7 Amount of Contribution (\$) \$21.55
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kai, Judith <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$31.55
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kai, Judith <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kai, Judith <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kawasaki, Guy <hr/> Contributor address; City; State; Zip Code Santa Cruz, CA 95062	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 324/692 Rpt: 327/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kearns, Diane <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78758	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Product Manager		9 Employer (See Instructions) Directv
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kearns, Diane <hr/> Contributor address; City; State; Zip Code Austin, TX 78758	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) Directv
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kearns, Diane <hr/> Contributor address; City; State; Zip Code Austin, TX 78758	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) Directv
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keel, Jean <hr/> Contributor address; City; State; Zip Code Porter, TX 77365	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keel, Jean <hr/> Contributor address; City; State; Zip Code Porter, TX 77365	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 325/692 Rpt: 328/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kehr, Kathleen <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77059	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelleher, Celia <hr/> Contributor address; City; State; Zip Code Spring, TX 77381	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelleher, Celia <hr/> Contributor address; City; State; Zip Code Spring, TX 77381	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelleher, Celia <hr/> Contributor address; City; State; Zip Code Spring, TX 77381	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keller, Angie <hr/> Contributor address; City; State; Zip Code Houston, TX 77009	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Tax Director		Employer (See Instructions) Abm Industries

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 326/692 Rpt: 329/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kempf, Kari <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77063	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Dietitian		9 Employer (See Instructions) Houston Isd
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kempf, Kari <hr/> Contributor address; City; State; Zip Code Houston, TX 77063	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Dietitian		Employer (See Instructions) Houston Isd
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kempf, Kari <hr/> Contributor address; City; State; Zip Code Houston, TX 77063	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Dietitian		Employer (See Instructions) Houston Isd
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kendlehart, Philip <hr/> Contributor address; City; State; Zip Code Allen, TX 75002	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Carla <hr/> Contributor address; City; State; Zip Code Fort Davis, TX 79734	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 327/692 Rpt: 330/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Cheryl <hr/> 6 Contributor address; City; State; Zip Code Lytle, TX 78052	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Cheryl <hr/> Contributor address; City; State; Zip Code Lytle, TX 78052	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Heather <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Heather <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Heather <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 328/692 Rpt: 331/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Jim <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78745-3121	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Karst Ecologist		9 Employer (See Instructions) Self-Employed
Date 07/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Peggy <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Peggy <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Peggy <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Peggy <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 329/692 Rpt: 332/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Peggy <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78633	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Peggy <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Peggy <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Peggy <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Peggy <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 330/692 Rpt: 333/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenney, Stephen <hr/> 6 Contributor address; City; State; Zip Code Woodstock, IL 60098	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Writer		9 Employer (See Instructions) Dystopic Bliss Press
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenney, Stephen <hr/> Contributor address; City; State; Zip Code Woodstock, IL 60098	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Dystopic Bliss Press
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenney, Stephen <hr/> Contributor address; City; State; Zip Code Woodstock, IL 60098	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Dystopic Bliss Press
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenney, Stephen <hr/> Contributor address; City; State; Zip Code Woodstock, IL 60098	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Dystopic Bliss Press
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenny, Benny <hr/> Contributor address; City; State; Zip Code Houston, TX 77098	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 331/692 Rpt: 334/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenny, Michael <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77041	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenny, Michael <hr/> Contributor address; City; State; Zip Code Houston, TX 77041	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kester, Diane <hr/> Contributor address; City; State; Zip Code Austin, TX 78753	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Khosrowpour, Darlene <hr/> Contributor address; City; State; Zip Code Pittsboro, NC 27312-5782	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Khosrowpour, Darlene <hr/> Contributor address; City; State; Zip Code Pittsboro, NC 27312	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Grand River Medical Center

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 332/692 Rpt: 335/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kieffer, Amanda <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78209	7 Amount of Contribution (\$) \$8.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kilbourn, Leslie <hr/> Contributor address; City; State; Zip Code Houston, TX 77005	Amount of Contribution (\$) \$114.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kilbride, Laurie <hr/> Contributor address; City; State; Zip Code Cypress, TX 77429-3811	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kilbride, Laurie <hr/> Contributor address; City; State; Zip Code Cypress, TX 77429	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Killam, Adrian <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self-Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 333/692 Rpt: 336/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Killam, Adrian <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78746	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions) Self-Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Killam, Adrian <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self-Employed
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Killian, Alison <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Software Implementation		Employer (See Instructions) Healthcare Control Systems
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Killian, Alison <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Software Implementation		Employer (See Instructions) Healthcare Control Systems
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Killian, Alison <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Software Implementation		Employer (See Instructions) Healthcare Control Systems

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 334/692 Rpt: 337/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kincaid, Dana <hr/> 6 Contributor address; City; State; Zip Code Leesburg, VA 20176	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Loudoun County Public Schools
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Maricela <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75006	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Nanny		Employer (See Instructions) Harris Family
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Sally <hr/> Contributor address; City; State; Zip Code Dallas, TX 75206	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Sally <hr/> Contributor address; City; State; Zip Code Dallas, TX 75206	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinnee, Sean <hr/> Contributor address; City; State; Zip Code Addison, TX 75001	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Lab19

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 335/692 Rpt: 338/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kipple, Jennifer <hr/> 6 Contributor address; City; State; Zip Code Richardson, TX 75080	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kipple, Jennifer <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kipple, John <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirk, Edythe <hr/> Contributor address; City; State; Zip Code Port Arthur, TX 77640	Amount of Contribution (\$) \$55.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirk, Edythe <hr/> Contributor address; City; State; Zip Code Port Arthur, TX 77640	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) College Professor		Employer (See Instructions) Lamar University

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 336/692 Rpt: 339/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kizer, Kathryn <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78750	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retail		9 Employer (See Instructions) Petsmart
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klager, Amie <hr/> Contributor address; City; State; Zip Code Houston, TX 77345	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Quality Manager		Employer (See Instructions) Medtronic
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klein, Carrie <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78212	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klein, Heatherjoy <hr/> Contributor address; City; State; Zip Code Plantation, FL 33317	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klein, Nora <hr/> Contributor address; City; State; Zip Code Houston, TX 77025	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 337/692 Rpt: 340/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klein, Ruth <hr/> 6 Contributor address; City; State; Zip Code Richland Hills, TX 76118	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klein, Ruth <hr/> Contributor address; City; State; Zip Code Richland Hills, TX 76118	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klein, Ruth <hr/> Contributor address; City; State; Zip Code Richland Hills, TX 76118	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klempay, Kelly <hr/> Contributor address; City; State; Zip Code Austin, TX 78739	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Pt		Employer (See Instructions) Self-Employed
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klimpel, Brenda <hr/> Contributor address; City; State; Zip Code Lewisville, TX 75067	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 338/692 Rpt: 341/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kline, Laura <hr/> 6 Contributor address; City; State; Zip Code Fulshear, TX 77441	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kline, Laura <hr/> Contributor address; City; State; Zip Code Fulshear, TX 77441	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kline, Laura <hr/> Contributor address; City; State; Zip Code Fulshear, TX 77441	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kline, Mark <hr/> Contributor address; City; State; Zip Code Fulshear, TX 77441	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kline, Mark <hr/> Contributor address; City; State; Zip Code Fulshear, TX 77441	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 339/692 Rpt: 342/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kline, Mark <hr/> 6 Contributor address; City; State; Zip Code Fulshear, TX 77441	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klopp, Tonya <hr/> Contributor address; City; State; Zip Code Houston, TX 77007	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Self-Employed
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klopp, Tonya <hr/> Contributor address; City; State; Zip Code Houston, TX 77007	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Self-Employed
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klopp, Tonya <hr/> Contributor address; City; State; Zip Code Houston, TX 77007	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Self-Employed
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klose, Joanna <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 340/692 Rpt: 343/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klose, Joanna 6 Contributor address; City; State; Zip Code Austin, TX 78723	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klose, Joanna Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knapton, Edward Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Dell Inc.
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knapton, Edward Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Dell Inc.
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knapton, Edward Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Dell Inc.

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 341/692 Rpt: 344/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, Mary <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78759	7 Amount of Contribution (\$) \$54.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knisely, Marc <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Jackson Sjoberg Llp
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knust, Christie <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koen, Bobbie <hr/> Contributor address; City; State; Zip Code Houston, TX 77091	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Program Manager		Employer (See Instructions) University Of Houston
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koen, Bobbie <hr/> Contributor address; City; State; Zip Code Houston, TX 77091	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Program Manager		Employer (See Instructions) University Of Houston

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 342/692 Rpt: 345/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koen, Bobbie <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77091	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Program Manager		9 Employer (See Instructions) University Of Houston
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kokowsky, Elisa <hr/> Contributor address; City; State; Zip Code Wake Forest, NC 27587	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kokowsky, Elisa <hr/> Contributor address; City; State; Zip Code Wake Forest, NC 27587	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kokowsky, Elisa <hr/> Contributor address; City; State; Zip Code Wake Forest, NC 27587	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koonce, Sam <hr/> Contributor address; City; State; Zip Code Round Round, TX 78681	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 343/692 Rpt: 346/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kosobud, Terry <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78749	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/01/2024	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 (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	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 (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	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 (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kovacs, Jane <hr/> Contributor address; City; State; Zip Code Austin, TX 78750	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 344/692 Rpt: 347/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kovacs, Jane <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78750	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Marketing		9 Employer (See Instructions) Austin Regional Clinic
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kovner, Elaine And Steve <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78216	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kowalsky, Ann <hr/> Contributor address; City; State; Zip Code Houston, TX 77007	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kowalsky, Ann <hr/> Contributor address; City; State; Zip Code Houston, TX 77007	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kowalsky, Ann <hr/> Contributor address; City; State; Zip Code Houston, TX 77007	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 345/692 Rpt: 348/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kowalsky, Ann <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77007	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kowalsky, Ann <hr/> Contributor address; City; State; Zip Code Houston, TX 77007	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kowalsky, Ann <hr/> Contributor address; City; State; Zip Code Houston, TX 77007	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kozlowicz, Joshua <hr/> Contributor address; City; State; Zip Code Grand Rapids, MI 49504	Amount of Contribution (\$) \$99.55
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kraatz, Laura <hr/> Contributor address; City; State; Zip Code Irving, TX 75061	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 346/692 Rpt: 349/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krach, Sue <hr/> 6 Contributor address; City; State; Zip Code Plano, TX 75025	7 Amount of Contribution (\$) \$21.55
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krebs, Marie <hr/> Contributor address; City; State; Zip Code Austin, TX 78747	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Therapist/Interventionist		Employer (See Instructions) Self-Employed
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krebs, Marie <hr/> Contributor address; City; State; Zip Code Austin, TX 78747	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Therapist/Interventionist		Employer (See Instructions) Self-Employed
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krebs, Marie <hr/> Contributor address; City; State; Zip Code Austin, TX 78747	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Therapist/Interventionist		Employer (See Instructions) Self-Employed
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kreider, Douglas <hr/> Contributor address; City; State; Zip Code Kaneohe, HI 96744-1940	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kreider, Douglas <hr/> 6 Contributor address; City; State; Zip Code Kaneohe, HI 96744-1940	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kristin, Vrana <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Beck Tech
Date 07/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krizek, Mary Brigid <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79413	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Lisd
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krizek, Mary Brigid <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79413	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Lisd
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krizek, Mary Brigid <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79413	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Lisd

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 348/692 Rpt: 351/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kromelis, Michelle <hr/> 6 Contributor address; City; State; Zip Code Frisco, TX 75033	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Pharmacist		9 Employer (See Instructions) Childrens Health
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kromelis, Michelle <hr/> Contributor address; City; State; Zip Code Frisco, TX 75033	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krumholz, Sharon <hr/> Contributor address; City; State; Zip Code Austin, TX 78730	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krumholz, Sharon <hr/> Contributor address; City; State; Zip Code Austin, TX 78730	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krumholz, Sharon <hr/> Contributor address; City; State; Zip Code Austin, TX 78730	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 349/692 Rpt: 352/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krumholz, Sharon <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78730	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krumholz, Sharon <hr/> Contributor address; City; State; Zip Code Austin, TX 78730	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuehner, Steve & Kathy <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) N/A
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kull, Veda <hr/> Contributor address; City; State; Zip Code Rowlett, TX 75088	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kull, Veda <hr/> Contributor address; City; State; Zip Code Rowlett, TX 75088	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 350/692 Rpt: 353/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kull, Veda <hr/> 6 Contributor address; City; State; Zip Code Rowlett, TX 75088	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kulupka, Teresa <hr/> Contributor address; City; State; Zip Code Southlake, TX 76092	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Online Marketing Dir		Employer (See Instructions) Norwex
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kulupka, Teresa <hr/> Contributor address; City; State; Zip Code Southlake, TX 76092	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Online Marketing Dir		Employer (See Instructions) Norwex
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kulupka, Teresa <hr/> Contributor address; City; State; Zip Code Southlake, TX 76092	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Online Marketing Dir		Employer (See Instructions) Norwex
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kunding, Ravelle <hr/> Contributor address; City; State; Zip Code Horseshoe Bay, TX 78654	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 351/692 Rpt: 354/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kunding, Ravelle <hr/> 6 Contributor address; City; State; Zip Code Horseshoe Bay, TX 78654	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kunding, Ravelle <hr/> Contributor address; City; State; Zip Code Horseshoe Bay, TX 78654	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 07/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kutinac, Lisa <hr/> Contributor address; City; State; Zip Code League City, TX 77573	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) L Pernick, Nat <hr/> Contributor address; City; State; Zip Code Bingham Farms, MI 48025	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Pathologist		Employer (See Instructions) Pathologyoutlines.Com Inc.
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) L Reid, Heather <hr/> Contributor address; City; State; Zip Code Anna, TX 75409	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Self-Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 352/692 Rpt: 355/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ladin, Marilyn <hr/> 6 Contributor address; City; State; Zip Code The Woodlands, TX 77382	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ladin, Marilyn <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77382	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ladin, Marilyn <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77382	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lagrone, Andrea <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Paralegal		Employer (See Instructions) Asuragen
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laird, Amy <hr/> Contributor address; City; State; Zip Code New Waverly, TX 77358	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CPA		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: 353/692 Rpt: 356/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamontagne, Carin <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78255	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Professional Branding Specialist		9 Employer (See Instructions) Lhh
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landers, Cilicia <hr/> Contributor address; City; State; Zip Code Austin, TX 78717	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landers, Cilicia <hr/> Contributor address; City; State; Zip Code Austin, TX 78717-4811	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landry, Jennifer <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76137	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Museum Director		Employer (See Instructions) City Of Irving
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langlinais, Nevyn <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) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 354/692 Rpt: 357/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lansley, Nicole <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78628	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Health Insurance		9 Employer (See Instructions) Aetna
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larcade, Margaret <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78212	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larson, Jeff <hr/> Contributor address; City; State; Zip Code Palm Desert, CA 92260	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Administrative Assistant		Employer (See Instructions) College Of The Desert
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lasswell, Stella <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76904	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lauder, Debra <hr/> Contributor address; City; State; Zip Code Liberty Hill, TX 78642	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions) Debra Lauder

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawley, Kirsten <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78628	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawrence, Lorna <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lazar, Jeffrey <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78738	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lazarine, Julie <hr/> Contributor address; City; State; Zip Code Austin, TX 78758	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Massage Therapist		Employer (See Instructions) Hyatt Corporation
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lazarine, Julie <hr/> Contributor address; City; State; Zip Code Austin, TX 78758	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Massage Therapist		Employer (See Instructions) Hyatt Corporation

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 356/692 Rpt: 359/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Le, Rachel <hr/> 6 Contributor address; City; State; Zip Code Bellaire, TX 77401	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ledsinger, Kelly <hr/> Contributor address; City; State; Zip Code Katy, TX 77450	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ledsinger, Kelly <hr/> Contributor address; City; State; Zip Code Katy, TX 77450	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ledsinger, Kelly <hr/> Contributor address; City; State; Zip Code Katy, TX 77450	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Jeannine <hr/> Contributor address; City; State; Zip Code Garland, TX 75043	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Agreeya Solutions

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 357/692 Rpt: 360/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lehmann, Delphine 6 Contributor address; City; State; Zip Code Euless, TX 76039-8517	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lehmann, Katherine Contributor address; City; State; Zip Code Houston, TX 77044	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Business Process Analyst		Employer (See Instructions) Kinder Morgan
Date 07/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leigh, Micah Contributor address; City; State; Zip Code Port Arthur, TX 77642	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leigh, Micah Contributor address; City; State; Zip Code Port Arthur, TX 77642	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leigh, Micah Contributor address; City; State; Zip Code Port Arthur, TX 77642	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 358/692 Rpt: 361/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leigh, Micah <hr/> 6 Contributor address; City; State; Zip Code Port Arthur, TX 77642	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leigh, Micah <hr/> Contributor address; City; State; Zip Code Port Arthur, TX 77642	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leigh, Micah <hr/> Contributor address; City; State; Zip Code Port Arthur, TX 77642	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leigh, Micah <hr/> Contributor address; City; State; Zip Code Port Arthur, TX 77642	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leiningner, Katie <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$67.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leininger, Katie <hr/> 6 Contributor address; City; State; Zip Code Pearland, TX 77584	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) City Of Pearland
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leleux, Rebekah <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Ap Admin		Employer (See Instructions) Lisd
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leleux, Rebekah <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Ap Admin		Employer (See Instructions) Lisd
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leleux, Rebekah <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Ap Admin		Employer (See Instructions) Lisd
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lemaypatten, Michelle <hr/> Contributor address; City; State; Zip Code Dallas, TX 75243	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Bookseller		Employer (See Instructions) Barnes And Noble

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lemaypatten, Michelle <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75243	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) Bookseller		9 Employer (See Instructions) Barnes And Noble
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lemaypatten, Michelle <hr/> Contributor address; City; State; Zip Code Dallas, TX 75243	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Bookseller		Employer (See Instructions) Barnes And Noble
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lemmond, Byron <hr/> Contributor address; City; State; Zip Code Katy, TX 77449-7504	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lemmond, Byron <hr/> Contributor address; City; State; Zip Code Katy, TX 77449-7504	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lemmond, Byron <hr/> Contributor address; City; State; Zip Code Katy, TX 77449-7504	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Wood

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lemmond, Byron <hr/> 6 Contributor address; City; State; Zip Code Katy, TX 77449-7504	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Wood
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lemmond, Byron <hr/> Contributor address; City; State; Zip Code Katy, TX 77449-7504	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Wood
Date 07/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lenehan, Mary <hr/> Contributor address; City; State; Zip Code Brookfield, IL 60513	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Self-Employed
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lerom, Shirley <hr/> Contributor address; City; State; Zip Code Dallas, TX 75218	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levy, Alene <hr/> Contributor address; City; State; Zip Code Houston, TX 77025	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 362/692 Rpt: 365/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levy, Alene <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77025	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self-Employed
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levy, Alene <hr/> Contributor address; City; State; Zip Code Houston, TX 77025	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-Employed
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levy, Alene <hr/> Contributor address; City; State; Zip Code Houston, TX 77025	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-Employed
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levy, Alene <hr/> Contributor address; City; State; Zip Code Houston, TX 77025	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-Employed
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewandowski, James <hr/> Contributor address; City; State; Zip Code Katy, TX 77450	Amount of Contribution (\$) \$34.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Robert 6 Contributor address; City; State; Zip Code Austin, TX 78749	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Robert Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Robert Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Sarah Contributor address; City; State; Zip Code Kerrville, TX 78028	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Stakeholder Engagement Specialist		Employer (See Instructions) Wecc
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lieber, Karen Contributor address; City; State; Zip Code Keller, TX 76248	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Liebert, Aaron <hr/> 6 Contributor address; City; State; Zip Code Arlington, VA 22201	7 Amount of Contribution (\$) \$34.69
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linarte, Israel <hr/> Contributor address; City; State; Zip Code Beaufort, NC 28516	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lindemann, Pamela <hr/> Contributor address; City; State; Zip Code Pasadena, TX 77505	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Program Manager		Employer (See Instructions) Solvay
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lindquist, Gretchen <hr/> Contributor address; City; State; Zip Code Houston, TX 77007-2628	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lindsay, Lynne <hr/> Contributor address; City; State; Zip Code Del Valle, TX 78617	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lindsey, Charles <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75214	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lindy, Cheryl <hr/> Contributor address; City; State; Zip Code Kingwood, TX 77339	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linebaugh, Sharan <hr/> Contributor address; City; State; Zip Code Junction, TX 76849	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linebaugh, Sharan <hr/> Contributor address; City; State; Zip Code Junction, TX 76849	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linnell, Elizabeth <hr/> Contributor address; City; State; Zip Code Spring, TX 77388	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Business Manager		Employer (See Instructions) Everest Systems

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 366/692 Rpt: 369/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linnell, Elizabeth <hr/> 6 Contributor address; City; State; Zip Code Spring, TX 77388	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Business Manager		9 Employer (See Instructions) Everest Systems
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linnell, Elizabeth <hr/> Contributor address; City; State; Zip Code Spring, TX 77388	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Business Manager		Employer (See Instructions) Everest Systems
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lipchak, Oscar <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) N/A
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lipchak, Oscar <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) N/A
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lipe, Danielle <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79423	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Little, Rhonda <hr/> 6 Contributor address; City; State; Zip Code Vidor, TX 77662	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Little, Rhonda <hr/> Contributor address; City; State; Zip Code Vidor, TX 77662	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Little, Rhonda <hr/> Contributor address; City; State; Zip Code Vidor, TX 77662	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Litz, Cynthia <hr/> Contributor address; City; State; Zip Code Dallas, TX 75204	Amount of Contribution (\$) \$21.55
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lockhart, Kathleen <hr/> Contributor address; City; State; Zip Code Nacogdoches, TX 75965	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 368/692 Rpt: 371/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lockhart, Kathleen <hr/> 6 Contributor address; City; State; Zip Code Nacogdoches, TX 75965	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lockie, Jonathan <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11222	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Massage Therapy		Employer (See Instructions) Jonathan Lockie
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lockie, Jonathan <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11222	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) Massage Therapy		Employer (See Instructions) Self-Employed
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loebis, Jennifer <hr/> Contributor address; City; State; Zip Code Vancouver, WA 98664	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loftis, Gail <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Risd

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 369/692 Rpt: 372/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loftis, Gail <hr/> 6 Contributor address; City; State; Zip Code Richardson, TX 75080	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Risd
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loftis, Gail <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Risd
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lofton, Susan <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Lago Vista Isd
Date 08/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lofton, Susan <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Lago Vista Isd
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Logan, Lauri <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Logan, Lori <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78230	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Trinity University		9 Employer (See Instructions) Controller
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Logan, Lori <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78230	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Trinity University		Employer (See Instructions) Controller
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Logan, Lori <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78230	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Trinity University		Employer (See Instructions) Controller
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loos, Carolyn <hr/> Contributor address; City; State; Zip Code Houston, TX 77008	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 07/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Gregi <hr/> Contributor address; City; State; Zip Code Dallas, TX 75252	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 371/692 Rpt: 374/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Gregi <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75252	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Gregi <hr/> Contributor address; City; State; Zip Code Dallas, TX 75252	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lorraine, Joni <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Program Coordinator		Employer (See Instructions) Unity Worldwide Ministries
Date 07/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Love, Doug <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Love, Doug <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Love, Doug <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78633	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Love, Doug <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Love, Doug <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Love, Elizabeth <hr/> Contributor address; City; State; Zip Code Austin, TX 78745-1750	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Love, Elizabeth <hr/> Contributor address; City; State; Zip Code Austin, TX 78745-1750	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Love, John <hr/> 6 Contributor address; City; State; Zip Code Hubbard, TX 76648-4745	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Bookkeeper		9 Employer (See Instructions) Lwm Llc
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lovitz, Nancy <hr/> Contributor address; City; State; Zip Code Spring, TX 77382	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lowrey, Amy <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Singer		Employer (See Instructions) Self-Employed
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lowrey, Amy <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Singer		Employer (See Instructions) Self-Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lowrey, Amy <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Singer		Employer (See Instructions) Self-Employed

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loy, Terri <hr/> 6 Contributor address; City; State; Zip Code Amarillo, TX 79106	7 Amount of Contribution (\$) \$45.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luce, Elise <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luckett, Kathryn <hr/> Contributor address; City; State; Zip Code Buda, TX 78610	Amount of Contribution (\$) \$84.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lugo, Judy <hr/> Contributor address; City; State; Zip Code El Paso, TX 79930	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lugo, Judy <hr/> Contributor address; City; State; Zip Code El Paso, TX 79930-4809	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 375/692 Rpt: 378/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lugo, Judy <hr/> 6 Contributor address; City; State; Zip Code El Paso, TX 79930-4809	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lugo, Judy <hr/> Contributor address; City; State; Zip Code El Paso, TX 79930	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lulic, Nada <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Hr Executive		Employer (See Instructions) Self-Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lulic, Nada <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Hr Executive		Employer (See Instructions) Self-Employed
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lumsden, Kimberlie <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$43.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lundy, Jerry <hr/> 6 Contributor address; City; State; Zip Code Irving, TX 75063-4422	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lurey, Nadine <hr/> Contributor address; City; State; Zip Code Morton Grove, IL 60053	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lurie, Michelle <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lutes, Molly <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lutes, Molly <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Student

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lutes, Molly 6 Contributor address; City; State; Zip Code Austin, TX 78729	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) RN		9 Employer (See Instructions) Student
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lutes, Molly Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Student
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luzania, Catherine Contributor address; City; State; Zip Code San Antonio, TX 78232	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lyford, Nicki Contributor address; City; State; Zip Code Carrollton, TX 75006-5222	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lyford, Nicki Contributor address; City; State; Zip Code Carrollton, TX 75006-5222	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 378/692 Rpt: 381/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lyford, Nicki <hr/> 6 Contributor address; City; State; Zip Code Carrollton, TX 75006-5222	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lynch, Melinda <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lynn, Linda <hr/> Contributor address; City; State; Zip Code Houston, TX 77084	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lyons, Mary <hr/> Contributor address; City; State; Zip Code Frsnkln, MA 02038	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lyons, Mary <hr/> Contributor address; City; State; Zip Code Frsnkln, MA 02038	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lyons, Mary <hr/> 6 Contributor address; City; State; Zip Code Frsnkln, MA 02038	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) M Ramsey, Christina <hr/> Contributor address; City; State; Zip Code Denton, TX 76209	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) Excel Finish
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) M Ramsey, Christina <hr/> Contributor address; City; State; Zip Code Denton, TX 76209	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) Excel Finish
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) M Ramsey, Christina <hr/> Contributor address; City; State; Zip Code Denton, TX 76209	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) Excel Finish
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mack, Amy Rae <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Self-Employed

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mackenzie, Larami <hr/> 6 Contributor address; City; State; Zip Code Glenside, PA 19038	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Dr.
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mackler, Sandra <hr/> Contributor address; City; State; Zip Code West Springfield, MA 01089	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self-Employed
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mackler, Sandra <hr/> Contributor address; City; State; Zip Code West Springfield, MA 01089	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self-Employed
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mackler, Sandra <hr/> Contributor address; City; State; Zip Code West Springfield, MA 01089	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self-Employed
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mackler, Sandra <hr/> Contributor address; City; State; Zip Code West Springfield, MA 01089	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self-Employed

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mackoy, Barbara <hr/> 6 Contributor address; City; State; Zip Code Cedar Hill, TX 75104	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Bowman Engineering And Consulting
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mackoy, Barbara <hr/> Contributor address; City; State; Zip Code Cedar Hill, TX 75104	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Bowman Engineering And Consulting
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mackoy, Barbara <hr/> Contributor address; City; State; Zip Code Cedar Hill, TX 75104	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Bowman Engineering And Consulting
Date 07/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Macune, Don <hr/> Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Electrical Engineer		Employer (See Instructions) Paisano Labs
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madden, Elisabeth <hr/> Contributor address; City; State; Zip Code Houston, TX 77070	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maedgen, Amanda <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Project Manager		9 Employer (See Instructions) Communitycare
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maedgen, Amanda <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Communitycare
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maedgen, Amanda <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Communitycare
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maguire, Barbara <hr/> Contributor address; City; State; Zip Code Seattle, WA 98103	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maguire, Mandy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75224-1429	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Utd

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 383/692 Rpt: 386/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maitre, Debra <hr/> 6 Contributor address; City; State; Zip Code Plano, TX 75025	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Registered Nurse		9 Employer (See Instructions) Baylor Medical Center At Mckinney
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malcolm, Rebecca <hr/> Contributor address; City; State; Zip Code Cameron, TX 76520	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maldonado, Bridget <hr/> Contributor address; City; State; Zip Code Donna, TX 78537	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maldonado, Linda <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78254	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maldonado, Patricia <hr/> Contributor address; City; State; Zip Code New York, NY 10033	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 384/692 Rpt: 387/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maldonado, Patricia <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10033	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maldonado, Patricia <hr/> Contributor address; City; State; Zip Code New York, NY 10033	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mallett, Renee <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malooly, Kathleen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$9.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mang, Andreas <hr/> Contributor address; City; State; Zip Code Houston, TX 77009-6143	Amount of Contribution (\$) \$36.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mangan, Sherry <hr/> 6 Contributor address; City; State; Zip Code La Grange Park, IL 60526	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manley, Lockette <hr/> Contributor address; City; State; Zip Code Farmers Brnch, TX 75234	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mann, Sarah <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76137	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Human Resources		Employer (See Instructions) Ent Specialty Partners
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mann, Sarah <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76137	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Human Resources		Employer (See Instructions) Ent Specialty Partners
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mann, Sarah <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76137	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Human Resources		Employer (See Instructions) Ent Specialty Partners

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manuel, Cynthia <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76137	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manuel, Cynthia <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76137	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manuel, Cynthia <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76137	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maples, Delenn <hr/> Contributor address; City; State; Zip Code Houston, TX 77096	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maples, Delenn <hr/> Contributor address; City; State; Zip Code Houston, TX 77096	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maples, Delenn <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77096	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcano, Jennifer <hr/> Contributor address; City; State; Zip Code Richardson, TX 75081	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Sales Manager		Employer (See Instructions) Datalink Bancard Services
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcum, Adrienne <hr/> Contributor address; City; State; Zip Code Bella Vista, AR 72714	Amount of Contribution (\$) \$38.55
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Margolis-Husted, Jennifer <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) City Of Austin
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Margolis-Husted, Jennifer <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Coa

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marques, Laura <hr/> 6 Contributor address; City; State; Zip Code Leander, TX 78641	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Psychologist		9 Employer (See Instructions) Self-Employed
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Erin <hr/> Contributor address; City; State; Zip Code Denton, TX 76210	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) Isd
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Sara <hr/> Contributor address; City; State; Zip Code Aiea, HI 96701	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Virginia <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Virginia <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Virginia <hr/> 6 Contributor address; City; State; Zip Code Kyle, TX 78640	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Anne <hr/> Contributor address; City; State; Zip Code Newberry, FL 32669	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Tower Hill Insurance Group
Date 07/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, David <hr/> Contributor address; City; State; Zip Code Willis, TX 77318	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, David <hr/> Contributor address; City; State; Zip Code Willis, TX 77318	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Erin <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76137	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Rebekah <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78748	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Business Analyst		9 Employer (See Instructions) Centene
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Rebekah <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Business Analyst		Employer (See Instructions) Centene
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Rebekah <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Business Analyst		Employer (See Instructions) Centene
Date 09/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Sarah <hr/> Contributor address; City; State; Zip Code Katy, TX 77450	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Personal Fitness Trainer		Employer (See Instructions) Self-Employed
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martine, Ingrid <hr/> Contributor address; City; State; Zip Code Waco, TX 76701	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, April <hr/> 6 Contributor address; City; State; Zip Code Killeen, TX 76542	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Celinda <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Investigator		Employer (See Instructions) Oag
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Gary <hr/> Contributor address; City; State; Zip Code Houston, TX 77008	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Matias <hr/> Contributor address; City; State; Zip Code Lockhart, TX 78644-3307	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retail Support		Employer (See Instructions) Macy'S
Date 07/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Michelle <hr/> Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Administrative Assistant		Employer (See Instructions) Electronic Arts

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Mom <hr/> 6 Contributor address; City; State; Zip Code Weslaco, TX 78596	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marvel Shute, Karen <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78216-3435	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Marvel Law Groip
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marvel Shute, Karen <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78216-3435	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Marvel Law Groip
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marvel Shute, Karen <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78216-3435	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Marvel Law Groip
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mas, Miriam <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mas, Miriam <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78748	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mas, Miriam <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mas, Miriam <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Massey, Lois <hr/> Contributor address; City; State; Zip Code Dallas, TX 75254	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Alcatel Lucent
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Massey, Lois <hr/> Contributor address; City; State; Zip Code Dallas, TX 75254	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Alcatel Lucent

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Massey, Lois <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75254	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Software Engineer		9 Employer (See Instructions) Alcatel Lucent
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Massey-Warren, Sarah <hr/> Contributor address; City; State; Zip Code Denver, CO 80220	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mastenbrook, Shirley <hr/> Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mastin, Michelle <hr/> Contributor address; City; State; Zip Code Bellalre, TX 77401	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions) Ini Inc.
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mateja, Mitchell <hr/> Contributor address; City; State; Zip Code Houston, TX 77018	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matlock, Benjamin L 6 Contributor address; City; State; Zip Code Fort Worth, TX 76244	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Security Officer Non-Commission		9 Employer (See Instructions) Good Guard Security Services Inc.
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthews, Lori Contributor address; City; State; Zip Code Sienna, TX 77459	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-Employed
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthews, Lori Contributor address; City; State; Zip Code Sienna, TX 77459	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-Employed
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthews, Lori Contributor address; City; State; Zip Code Sienna, TX 77459	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-Employed
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthews, Lori Contributor address; City; State; Zip Code Sienna, TX 77459	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-Employed

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matz, Barb <hr/> 6 Contributor address; City; State; Zip Code Northfield, MN 55057	7 Amount of Contribution (\$) \$34.69
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matz, Barb <hr/> Contributor address; City; State; Zip Code Northfield, MN 55057	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maxwell, Elizabeth G <hr/> Contributor address; City; State; Zip Code New York, NY 10011	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Clergy		Employer (See Instructions) Episcopal Church
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maxwell, Elizabeth G <hr/> Contributor address; City; State; Zip Code New York, NY 10011	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Clergy		Employer (See Instructions) Episcopal Church
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maxwell, Elizabeth G <hr/> Contributor address; City; State; Zip Code New York, NY 10011	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Clergy		Employer (See Instructions) Episcopal Church

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 397/692 Rpt: 400/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) May, Erica <hr/> 6 Contributor address; City; State; Zip Code Round Rock, TX 78665	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayfield, Heather <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76108	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcadam, Ann <hr/> Contributor address; City; State; Zip Code Spring, TX 77379	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAfee, Vanessa <hr/> Contributor address; City; State; Zip Code Texas City, TX 77599	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Fidencio Leija
Date 08/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAfee, Vanessa <hr/> Contributor address; City; State; Zip Code Texas City, TX 77599	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Fidencio Leija

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 398/692 Rpt: 401/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAfee, Vanessa <hr/> 6 Contributor address; City; State; Zip Code Texas City, TX 77599	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Fidencio Leija
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcauliffe, Cathleen <hr/> Contributor address; City; State; Zip Code Rockport, TX 78382	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcbeath, Andrea <hr/> Contributor address; City; State; Zip Code Wimberley, TX 78676	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mccall, Melanie <hr/> Contributor address; City; State; Zip Code Minneapolis, MN 55410-1151	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mccartney, Trish <hr/> Contributor address; City; State; Zip Code Port Clinton, OH 43452	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Insurance		Employer (See Instructions) Self-Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 399/692 Rpt: 402/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mccartney, Trish <hr/> 6 Contributor address; City; State; Zip Code Port Clinton, OH 43452-2108	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Insurance		9 Employer (See Instructions) Trish Mccartney In'S Agcy Inc
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mccary, Leigh <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Leigh Mccary
Date 07/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mccasland, Jean <hr/> Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mccasland, Jean <hr/> Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mccasland, Jean <hr/> Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 400/692 Rpt: 403/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcclintock, Deb <hr/> 6 Contributor address; City; State; Zip Code Johnson City, TX 78636	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCormick, Elsie <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78244	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mccorquodale, Alisa <hr/> Contributor address; City; State; Zip Code Montgomery, TX 77316	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mccrea, Maegan <hr/> Contributor address; City; State; Zip Code Cypress, TX 77433	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mccredie, Patricia <hr/> Contributor address; City; State; Zip Code Kenwood, CA 95452	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Self-Employed

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mccuistion, Rebecca <hr/> 6 Contributor address; City; State; Zip Code Richardson, TX 75081	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Office Manager		9 Employer (See Instructions) Northwestern Mutual
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mccuistion, Rebecca <hr/> Contributor address; City; State; Zip Code Richardson, TX 75081	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) Northwestern Mutual
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mccuistion, Rebecca <hr/> Contributor address; City; State; Zip Code Richardson, TX 75081	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) Northwestern Mutual
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mccullough, Jo <hr/> Contributor address; City; State; Zip Code Sanger, TX 76266	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mccullough, Jo <hr/> Contributor address; City; State; Zip Code Sanger, TX 76266	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 402/692 Rpt: 405/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcgarity, Cathleen <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78731	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 08/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcgarity, Cathleen <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcgarity, Cathleen <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcgarrahan, Andy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self-Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcgarrahan, Andy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self-Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 403/692 Rpt: 406/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcgarrahan, Andy <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75248	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Psychologist		9 Employer (See Instructions) Self-Employed
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcgarrahan, Andy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self-Employed
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcgarrahan, Andy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self-Employed
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcgarrahan, Andy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self-Employed
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcgarrahan, Andy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self-Employed

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcgrane, Margaret <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77057	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McIntosh, Sara <hr/> Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McIntosh, Sara <hr/> Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McIntosh, Sara <hr/> Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McIntosh, Sara <hr/> Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 405/692 Rpt: 408/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mckee, Mary <hr/> 6 Contributor address; City; State; Zip Code Cedar Park, TX 78613	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mckenna, Paula <hr/> Contributor address; City; State; Zip Code Port Arthur, TX 77642	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mckinney, Sara <hr/> Contributor address; City; State; Zip Code Hutto, TX 78634	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mckown, Becky <hr/> Contributor address; City; State; Zip Code Austin Tx 78748 Usa, TX 78748	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self-Employed
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mckown, Becky <hr/> Contributor address; City; State; Zip Code Austin Tx 78748 Usa, TX 78748	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self-Employed

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mckown, Becky <hr/> 6 Contributor address; City; State; Zip Code Austin Tx 78748 Usa, TX 78748	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Self-Employed
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcleod, Becky <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcmahan, Carrie <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self-Employed
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcmahan, Carrie <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self-Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcmahan, Carrie <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self-Employed

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcmichael, Diane <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78738	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcminn, Brandi <hr/> Contributor address; City; State; Zip Code Flower Mound, TX 75028	Amount of Contribution (\$) \$41.55
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcmullen, Fara <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcmullen, Fara <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mcvay, Jason <hr/> Contributor address; City; State; Zip Code Abilene, TX 79602	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meier, Carolyn <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76120	7 Amount of Contribution (\$) \$105.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meier, Carolyn Brady <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76120	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mellor-Crummey, Cynthia <hr/> Contributor address; City; State; Zip Code Houston, TX 77096	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self-Employed
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mellor-Crummey, Cynthia <hr/> Contributor address; City; State; Zip Code Houston, TX 77096	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self-Employed
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mellor-Crummey, Cynthia <hr/> Contributor address; City; State; Zip Code Houston, TX 77096	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self-Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 409/692 Rpt: 412/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendez, Margaret <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78731	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendez, Margaret <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendez, Margaret <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendez, Margaret <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Menzel, Mindi <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Business Analyst		Employer (See Instructions) Txdot

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 410/692 Rpt: 413/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Menzel, Mindi 6 Contributor address; City; State; Zip Code Austin, TX 78748	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Business Analyst		9 Employer (See Instructions) Txdot
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Menzel, Mindi Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Business Analyst		Employer (See Instructions) Txdot
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merrill, Carmen Contributor address; City; State; Zip Code San Antonio, TX 78209	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merrill, Walter Contributor address; City; State; Zip Code Allen, TX 75002	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Kbr
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merubia, Sonia Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merubia, Sonia <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78704	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Messer, Darlene <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Messer, Darlene <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Messer, Darlene <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Messer, Darlene <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 412/692 Rpt: 415/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Messer, Elizabeth <hr/> 6 Contributor address; City; State; Zip Code Wichita Falls, TX 76309	7 Amount of Contribution (\$) \$83.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Messinger, Brus <hr/> Contributor address; City; State; Zip Code Grapevine, TX 76051-2532	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Pilot		Employer (See Instructions) Aal
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Messinger, Brus <hr/> Contributor address; City; State; Zip Code Grapevine, TX 76051-2532	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Pilot		Employer (See Instructions) Aal
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Messinger, Brus <hr/> Contributor address; City; State; Zip Code Grapevine, TX 76051	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Pilot		Employer (See Instructions) Aal
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Messinger, Brus <hr/> Contributor address; City; State; Zip Code Grapevine, TX 76051	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Pilot		Employer (See Instructions) Aal

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 413/692 Rpt: 416/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Messinger, Brus <hr/> 6 Contributor address; City; State; Zip Code Grapevine, TX 76051	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Pilot		9 Employer (See Instructions) Aal
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Metcalf, Marlene <hr/> Contributor address; City; State; Zip Code El Cerrito, CA 94530	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Metcalf, Marlene <hr/> Contributor address; City; State; Zip Code El Cerrito, CA 94530	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Metcalf, Marlene <hr/> Contributor address; City; State; Zip Code El Cerrito, CA 94530	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Metcalf, Marlene <hr/> Contributor address; City; State; Zip Code El Cerrito, CA 94530	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 414/692 Rpt: 417/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Metz, Colleen <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76179	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) System Manager		9 Employer (See Instructions) Alcon
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Kay <hr/> Contributor address; City; State; Zip Code Schertz, TX 78154	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Marjorie J <hr/> Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Marjorie J <hr/> Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Marjorie J <hr/> Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 415/692 Rpt: 418/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Marjorie J <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77055	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Marjorie J <hr/> Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Marjorie J <hr/> Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Marjorie J <hr/> Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Marjorie J <hr/> Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 416/692 Rpt: 419/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Marjorie J <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77055	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Marjorie J <hr/> Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Marjorie J <hr/> Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Marjorie J <hr/> Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Marjorie J <hr/> Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 417/692 Rpt: 420/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Marjorie J <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77055	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Marjorie J <hr/> Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Marjorie J <hr/> Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Marjorie J <hr/> Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Marjorie J <hr/> Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 418/692 Rpt: 421/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Marjorie J <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77055	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Marjorie J <hr/> Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michaelson, Hedrich <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michaelson, Hedrich <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michener, Josephine <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 419/692 Rpt: 422/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michon, Nancy <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77092	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Graphic Designer		9 Employer (See Instructions) Stewart Title
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michon, Nancy <hr/> Contributor address; City; State; Zip Code Houston, TX 77092	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Graphic Designer		Employer (See Instructions) Stewart Title
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mickelson, Kimberley <hr/> Contributor address; City; State; Zip Code Houston, TX 77004	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Olson & Olson Llp/Kmickelson Pc
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mickelson, Kimberley <hr/> Contributor address; City; State; Zip Code Houston, TX 77004	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Olson & Olson Llp/Kmickelson Pc
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mickelson, Kimberley <hr/> Contributor address; City; State; Zip Code Houston, TX 77004	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Olson & Olson Llp/Kmickelson Pc

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 420/692 Rpt: 423/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Middleton, Amber <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77035	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Social Worker		9 Employer (See Instructions) Depelchin
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mielcarek, Terrie <hr/> Contributor address; City; State; Zip Code Montgomery, TX 77356	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Med Tech		Employer (See Instructions) Lifecell Corp
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milan, Christina <hr/> Contributor address; City; State; Zip Code Cypress, TX 77433	Amount of Contribution (\$) \$88.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milan, Christina <hr/> Contributor address; City; State; Zip Code Cypress, TX 77433	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Tmhcc
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millard, Margot <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78201	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 421/692 Rpt: 424/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Ed <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78745-6501	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Faye <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78232	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Faye <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78232	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Faye <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78232	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Helen <hr/> Contributor address; City; State; Zip Code Arlington, TX 76017	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Graphics Operator/Video Producer		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: 422/692 Rpt: 425/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Jessica <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78230	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) St. George Episcopal School
Date 08/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Jessica <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78230	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) St. George Episcopal School
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Jessica <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78230	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) St. George Episcopal School
Date 07/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78758	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78758	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 423/692 Rpt: 426/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Karen <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78758	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 07/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Margaret <hr/> Contributor address; City; State; Zip Code Austin, TX 78735	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Austin Cc
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Margaret <hr/> Contributor address; City; State; Zip Code Austin, TX 78735	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Austin Cc
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Margaret <hr/> Contributor address; City; State; Zip Code Austin, TX 78735	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Austin Cc
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Margaret <hr/> Contributor address; City; State; Zip Code Austin, TX 78735	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 424/692 Rpt: 427/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Margaret <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78735	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Melissa <hr/> Contributor address; City; State; Zip Code Austin, TX 78733	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Melissa <hr/> Contributor address; City; State; Zip Code Austin, TX 78733	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Melissa <hr/> Contributor address; City; State; Zip Code Austin, TX 78733	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Pat <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 425/692 Rpt: 428/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Pat <hr/> 6 Contributor address; City; State; Zip Code Round Rock, TX 78681	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Patricia <hr/> Contributor address; City; State; Zip Code Chicago, IL 60611	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Rudolph <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Rudolph <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Rudolph <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 426/692 Rpt: 429/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Sarah <hr/> 6 Contributor address; City; State; Zip Code Watkinsville, GA 30677	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) BCBA		9 Employer (See Instructions) Bluesprig
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Wes <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) N/A
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millwee, Billy <hr/> Contributor address; City; State; Zip Code Driftwood, TX 78619	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Billy Millwee & Associates
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millwee, Billy <hr/> Contributor address; City; State; Zip Code Driftwood, TX 78619	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Billy Millwee & Associates
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minden, Shelley <hr/> Contributor address; City; State; Zip Code Seattle, WA 98102	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Editor		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: 427/692 Rpt: 430/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minden, Shelley <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98102	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Editor		9 Employer (See Instructions) Self-Employed
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minden, Shelley <hr/> Contributor address; City; State; Zip Code Seattle, WA 98102	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Editor		Employer (See Instructions) Self-Employed
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minshew, Carolyn <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78201	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minshew, Carolyn <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) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minshew, Carolyn <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) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 428/692 Rpt: 431/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mishkin, Bryan <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78729	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mishkin, Bryan <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, David <hr/> Contributor address; City; State; Zip Code Katy, TX 77450	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Flamingstar <hr/> Contributor address; City; State; Zip Code Lampasas, TX 76550	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Cook		Employer (See Instructions) Texas Taco Kitchen
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Genie <hr/> Contributor address; City; State; Zip Code Fort Davis, TX 79734	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 429/692 Rpt: 432/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Margaret <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77096	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mobley, Carolyn <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Tx
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mohlere, Virginia <hr/> Contributor address; City; State; Zip Code Spring, TX 77388-3381	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Scientific Editor		Employer (See Instructions) Uthealth
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moll, Janet <hr/> Contributor address; City; State; Zip Code Dallas, TX 75206	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monceaux, Julian <hr/> Contributor address; City; State; Zip Code New Braunfels, TX 78132	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 430/692 Rpt: 433/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monceaux, Julian <hr/> 6 Contributor address; City; State; Zip Code New Braunfels, TX 78132	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monceaux, Julian <hr/> Contributor address; City; State; Zip Code New Braunfels, TX 78132	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monson, Gina L <hr/> Contributor address; City; State; Zip Code Denison, TX 75021	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) It Support/Project Manager		Employer (See Instructions) Webbs Electric Heating & A/C
Date 08/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monson, Gina L <hr/> Contributor address; City; State; Zip Code Denison, TX 75021	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) It Support/Project Manager		Employer (See Instructions) Webbs Electric Heating & A/C
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monson, Gina L <hr/> Contributor address; City; State; Zip Code Denison, TX 75021	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) It Support/Project Manager		Employer (See Instructions) Webbs Electric Heating & A/C

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 431/692 Rpt: 434/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montero Sanchez, Irene <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77079	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Environmental Scientist		9 Employer (See Instructions) Bp
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montoya, Carol <hr/> Contributor address; City; State; Zip Code El Paso, TX 79936	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Public School Teacher		Employer (See Instructions) Socorro Isd
Date 07/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montoya, Carol <hr/> Contributor address; City; State; Zip Code El Paso, TX 79936	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Socorro Isd
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bethany <hr/> Contributor address; City; State; Zip Code Allen, TX 75002	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Allen Isd
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bethany <hr/> Contributor address; City; State; Zip Code Allen, TX 75002	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Allen Isd

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Bethany 6 Contributor address; City; State; Zip Code Allen, TX 75002	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Allen Isd
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Jackie Contributor address; City; State; Zip Code Boerne, TX 78015	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Kassie Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Pat Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Apple Inc.
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Pat Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Apple Inc.

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Pat <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78749	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Project Manager		9 Employer (See Instructions) Apple Inc.
Date 07/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moreland, Lydia <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Austin Isd
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moreland, Lydia <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Austin Isd
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moreland, Lydia <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Austin Isd
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morey, Roy <hr/> Contributor address; City; State; Zip Code Fort Davis, TX 79734	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 434/692 Rpt: 437/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgan, Ann <hr/> 6 Contributor address; City; State; Zip Code Kemah, TX 77565-2123	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgan, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78754-2011	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moriarty, Colleen <hr/> Contributor address; City; State; Zip Code El Paso, TX 79932	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moriarty, Colleen <hr/> Contributor address; City; State; Zip Code El Paso, TX 79932	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morman, Jeanne <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 435/692 Rpt: 438/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morman, Jeanne <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78748	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morman, Jeanne <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morman, Jeanne <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moros Capodiferro, Maria <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Elizabeth <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 436/692 Rpt: 439/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Elizabeth <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78745	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Elizabeth <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Rose <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664-4614	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mortimer, Katherine <hr/> Contributor address; City; State; Zip Code El Paso, TX 79912	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mosher, Anny <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 437/692 Rpt: 440/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mosier, David <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77071	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moy, Kirsten <hr/> Contributor address; City; State; Zip Code San Leandro, CA 94577	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mt.Joy, Greg <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) N/A
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mueller, Joan <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muise, Karen <hr/> Contributor address; City; State; Zip Code Round Rock, TX 01960	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 438/692 Rpt: 441/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muise, Karen <hr/> 6 Contributor address; City; State; Zip Code Peabody, MA 01960	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) IT		9 Employer (See Instructions) State Street Corp
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muldoon, Shannon <hr/> Contributor address; City; State; Zip Code St Paul, TX 75098	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Insurance
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mulhollan, Teresa <hr/> Contributor address; City; State; Zip Code Austin, TX 78758	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mulhollan, Teresa <hr/> Contributor address; City; State; Zip Code Austin, TX 78758	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mulholland, Erin <hr/> Contributor address; City; State; Zip Code Montgomery, TX 77356	Amount of Contribution (\$) \$115.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 439/692 Rpt: 442/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mulholland, Erin <hr/> 6 Contributor address; City; State; Zip Code Montgomery, TX 77356	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Montgomery Isd
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mulholland, Erin <hr/> Contributor address; City; State; Zip Code Montgomery, TX 77356	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Montgomery Isd
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mulrow, Cynthia <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78240-2560	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muniz, Jessyka <hr/> Contributor address; City; State; Zip Code Hockley, TX 77447	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Barista		Employer (See Instructions) Kroger
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muniz, Jessyka <hr/> Contributor address; City; State; Zip Code Hockley, TX 77447	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Barista		Employer (See Instructions) Kroger

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 440/692 Rpt: 443/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Muratori, Dorothy <hr/> 6 Contributor address; City; State; Zip Code Alpine, TX 79831	7 Amount of Contribution (\$) \$31.55
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murillo, Luz <hr/> Contributor address; City; State; Zip Code Kingsbury, TX 78638	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Texas State University
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murillo, Luz <hr/> Contributor address; City; State; Zip Code Kingsbury, TX 78638	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Texas State University
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murillo, Luz <hr/> Contributor address; City; State; Zip Code Kingsbury, TX 78638	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Texas State University
Date 07/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Carla <hr/> Contributor address; City; State; Zip Code Flower Mound, TX 75022	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 441/692 Rpt: 444/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Elizabeth <hr/> 6 Contributor address; City; State; Zip Code Franklin Square, NY 11010	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Hr Manager		9 Employer (See Instructions) Icbc Bank
Date 07/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Ned <hr/> Contributor address; City; State; Zip Code Mt Pleasant, WI 53403-9711	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Ned <hr/> Contributor address; City; State; Zip Code Mt Pleasant, WI 53403-9711	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Ned <hr/> Contributor address; City; State; Zip Code Mt Pleasant, WI 53403-9711	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mussawwir-Bias, Alanna <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76137	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Consumer Safety Officer		Employer (See Instructions) Usfda

MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 442/692 Rpt: 445/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Myers, Meghann <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77018	7 Amount of Contribution (\$) \$54.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Myers, Meghann <hr/> Contributor address; City; State; Zip Code Houston, TX 77018	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nadeau, Christine <hr/> Contributor address; City; State; Zip Code Hercules, CA 94547	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nall, Catherine <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nall, Catherine <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 443/692 Rpt: 446/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nash, Carolyn <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78745	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nath, Audrey <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Utmb
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nayak, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Susan Nayak
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neal, Mary <hr/> Contributor address; City; State; Zip Code St. Louis, MO 63105	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Self-Employed
Date 08/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nedland, Brock <hr/> Contributor address; City; State; Zip Code Houston, TX 77096	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 444/692 Rpt: 447/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neely, Michelle <hr/> 6 Contributor address; City; State; Zip Code Boerne, TX 78015	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neill, Rob <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640-2809	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Genis <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76901	Amount of Contribution (\$) \$23.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Joan <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nericcio, Mary A. <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Assistant Professor		Employer (See Instructions) Ut Austin

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 445/692 Rpt: 448/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neumeister, Irene <hr/> 6 Contributor address; City; State; Zip Code Salinas, CA 93907	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neumeister, Irene <hr/> Contributor address; City; State; Zip Code Salinas, CA 93907	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neumeister, Irene <hr/> Contributor address; City; State; Zip Code Salinas, CA 93907	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newby, Patricia <hr/> Contributor address; City; State; Zip Code Waxahachie, TX 75165	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newlynn, Rane <hr/> Contributor address; City; State; Zip Code Pipe Creek, TX 78063	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 446/692 Rpt: 449/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newlynn, Rane <hr/> 6 Contributor address; City; State; Zip Code Pipe Creek, TX 78063	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 08/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newlynn, Rane <hr/> Contributor address; City; State; Zip Code Pipe Creek, TX 78063	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newlynn, Rane <hr/> Contributor address; City; State; Zip Code Pipe Creek, TX 78063	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newlynn, Rane <hr/> Contributor address; City; State; Zip Code Pipe Creek, TX 78063	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newlynn, Rane <hr/> Contributor address; City; State; Zip Code Pipe Creek, TX 78063	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 447/692 Rpt: 450/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newman, Chad <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78752	7 Amount of Contribution (\$) \$8.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nicholls, Rosalie <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nicholls, Rosalie <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nicholls, Rosalie <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nicholls, Rosalie <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 448/692 Rpt: 451/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nicholls, Rosalie <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78748	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nichols, Dawn <hr/> Contributor address; City; State; Zip Code Alexandria, VA 22310	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Military		Employer (See Instructions) Usaf
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Niederlehner, John <hr/> Contributor address; City; State; Zip Code Mclean, VA 22101	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Air Line Pilots Association
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Niederlehner, John <hr/> Contributor address; City; State; Zip Code Mclean, VA 22101	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Air Line Pilots Association
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Niederlehner, John <hr/> Contributor address; City; State; Zip Code Mclean, VA 22101	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Air Line Pilots Association

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 449/692 Rpt: 452/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Niederlehner, John <hr/> 6 Contributor address; City; State; Zip Code Mclean, VA 22101	7 Amount of Contribution (\$) \$24.00
8 Principal occupation / Job title (See Instructions) Analyst		9 Employer (See Instructions) Air Line Pilots Association
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Niederlehner, John <hr/> Contributor address; City; State; Zip Code Mclean, VA 22101	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Air Line Pilots Association
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Niederlehner, John <hr/> Contributor address; City; State; Zip Code Mclean, VA 22101	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Air Line Pilots Association
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Niese, Lori <hr/> Contributor address; City; State; Zip Code Waltham, MA 02451	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Operations		Employer (See Instructions) 1Path
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nihill, Natalie <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 450/692 Rpt: 453/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nikolatos, John 6 Contributor address; City; State; Zip Code San Antonio, TX 78228-2003	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nikolatos, John Contributor address; City; State; Zip Code San Antonio, TX 78228-2003	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nikolatos, John Contributor address; City; State; Zip Code San Antonio, TX 78228-2003	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nixon, Vicki Contributor address; City; State; Zip Code Cedar Park, TX 78586	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Noel, Cherie Contributor address; City; State; Zip Code Waco, TX 76712	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 451/692 Rpt: 454/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Noel, Cherie <hr/> 6 Contributor address; City; State; Zip Code Waco, TX 76712	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Noel, Cherie <hr/> Contributor address; City; State; Zip Code Waco, TX 76712	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norman, John <hr/> Contributor address; City; State; Zip Code Florence, TX 76527	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norman, John <hr/> Contributor address; City; State; Zip Code Florence, TX 76527	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norman, John <hr/> Contributor address; City; State; Zip Code Florence, TX 76527	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 452/692 Rpt: 455/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norman, John <hr/> 6 Contributor address; City; State; Zip Code Florence, TX 76527	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norman, Sylvia <hr/> Contributor address; City; State; Zip Code Hurst, CA 76054-3355	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) Self-Employed
Date 07/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norris, Robert <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nunez, Lynda & Ignacio <hr/> Contributor address; City; State; Zip Code Arlington, TX 76013	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Connell, Melissa <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 453/692 Rpt: 456/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Dette, David <hr/> 6 Contributor address; City; State; Zip Code Washington, DC 20003	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Music Engraver		9 Employer (See Instructions) Self-Employed
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Dette, David <hr/> Contributor address; City; State; Zip Code Washington, DC 20003	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Music Engraver		Employer (See Instructions) Self-Employed
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Dette, David <hr/> Contributor address; City; State; Zip Code Washington, DC 20003	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Music Engraver		Employer (See Instructions) Self-Employed
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Donnell, Leslie <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77389	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Communications Professional		Employer (See Instructions) Wtw
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Obanner, Devita <hr/> Contributor address; City; State; Zip Code Cedar Hill, TX 75106	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Veteran Affairs

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ogan, Piper <hr/> 6 Contributor address; City; State; Zip Code Albuquerque, NM 87111	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Crafter		9 Employer (See Instructions) Self-Employed
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ogan, Piper <hr/> Contributor address; City; State; Zip Code Albuquerque, NM 87111	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Crafter		Employer (See Instructions) Self-Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ogan, Piper <hr/> Contributor address; City; State; Zip Code Albuquerque, NM 87111	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Crafter		Employer (See Instructions) Self-Employed
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Okoro, Ngozi <hr/> Contributor address; City; State; Zip Code Richmond, TX 77407	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olinger, James <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 455/692 Rpt: 458/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olinger, James <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78723	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olinger, James <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olivas-Way, Terri <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olivas-Way, Terri <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olive, Janus <hr/> Contributor address; City; State; Zip Code Bandera, TX 78003	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 456/692 Rpt: 459/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olsen, Diane <hr/> 6 Contributor address; City; State; Zip Code Galveston, TX 77551	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Curator		9 Employer (See Instructions) Moody Gardens
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olsen, Diane <hr/> Contributor address; City; State; Zip Code Galveston, TX 77551	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Curator		Employer (See Instructions) Moody Gardens
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olsen, Diane <hr/> Contributor address; City; State; Zip Code Galveston, TX 77551	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Curator		Employer (See Instructions) Moody Gardens
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78732	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oneal, Paula <hr/> Contributor address; City; State; Zip Code Del Rio, TX 78840	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 457/692 Rpt: 460/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oneal, Paula <hr/> 6 Contributor address; City; State; Zip Code Del Rio, TX 78840	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Onorato, Michelle <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Clis Health
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Onorato, Michelle <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Clis Health
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Onorato, Michelle <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Clis Health
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Onorato, Michelle <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self-Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 458/692 Rpt: 461/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Onorato, Michelle <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77062	7 Amount of Contribution (\$) \$22.00
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Self-Employed
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Onorato, Michelle <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self-Employed
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ortberg, Linda <hr/> Contributor address; City; State; Zip Code Rhome, TX 76078	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Osborn, Julia <hr/> Contributor address; City; State; Zip Code Wimberley, TX 78676	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) Old Glory Ranch
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Osborne, Elizabeth B <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 459/692 Rpt: 462/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Osborne, Elizabeth B <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78703	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Osborne, Elizabeth B <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oshatz, Donna <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oshatz, Donna <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oshatz, Donna <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 460/692 Rpt: 463/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Osoria, Patricia <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78247	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Osoria, Patricia <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78247	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Osoria, Patricia <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78247	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Otis, Lacey <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$85.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Otte, Kathie <hr/> Contributor address; City; State; Zip Code Houston, TX 77079	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Adoption Consultant		Employer (See Instructions) Self-Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 461/692 Rpt: 464/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Overly, Kathy <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77005	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Flora Lines
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Overly, Kathy <hr/> Contributor address; City; State; Zip Code Houston, TX 77005	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Flora Lines
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Overly, Kathy <hr/> Contributor address; City; State; Zip Code Houston, TX 77005	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Flora Lines
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owen, Carolyn <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oxford, Victoria <hr/> Contributor address; City; State; Zip Code North Richland Hills, TX 76182	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 462/692 Rpt: 465/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ozanich, Evelyn <hr/> 6 Contributor address; City; State; Zip Code El Paso, TX 79912	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ozanich, Evelyn <hr/> Contributor address; City; State; Zip Code El Paso, TX 79912	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ozanich, Evelyn <hr/> Contributor address; City; State; Zip Code El Paso, TX 79912	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pa, C <hr/> Contributor address; City; State; Zip Code Carlos, TX 77732	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Labor		Employer (See Instructions) Self-Employed
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pa, C <hr/> Contributor address; City; State; Zip Code Carlos, TX 77732	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Labor		Employer (See Instructions) Self-Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 463/692 Rpt: 466/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pace, Amy <hr/> 6 Contributor address; City; State; Zip Code Cypress, TX 77429	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pace, Amy <hr/> Contributor address; City; State; Zip Code Cypress, TX 77429	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pace, Amy <hr/> Contributor address; City; State; Zip Code Cypress, TX 77429	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pahl, Christi <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palermo, Terri <hr/> Contributor address; City; State; Zip Code Orland Park, IL 60462	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Advocate

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pantalion, Alese <hr/> 6 Contributor address; City; State; Zip Code Allen, TX 75002	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Legal Operations Manager		9 Employer (See Instructions) Critical Start Inc.
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paquette, Season <hr/> Contributor address; City; State; Zip Code Houston, TX 77081	Amount of Contribution (\$) \$38.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paras, Deb <hr/> Contributor address; City; State; Zip Code Houston, TX 77071-3205	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) R.A.Mclaurin
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Cheryl <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75007	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Cheryl <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75007	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) University Of Texas At Tyler

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 465/692 Rpt: 468/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Cheryl <hr/> 6 Contributor address; City; State; Zip Code Carrollton, TX 75007	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) RN		9 Employer (See Instructions) University Of Texas At Tyler
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Cheryl <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75007	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) University Of Texas At Tyler
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Chrystal <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$68.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Chrystal <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) Sdmc
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Chrystal <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) Sdmc

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 466/692 Rpt: 469/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Sandra <hr/> 6 Contributor address; City; State; Zip Code Trophy Club, TX 76262	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Teion <hr/> Contributor address; City; State; Zip Code Richmond, TX 77469	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Regional Director Cate Transition		Employer (See Instructions) Paradigm Healthcare
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Theresa <hr/> Contributor address; City; State; Zip Code Houston, TX 77066	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parks, Katherine <hr/> Contributor address; City; State; Zip Code Grapevine, TX 76051-4525	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Account Coordinator		Employer (See Instructions) Mesg
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parnes, Laurence <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78213-1240	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 467/692 Rpt: 470/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patschke, Justin <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76116	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Sales-Account Manager		9 Employer (See Instructions) Future Com
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, Amanda <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78254	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, Amanda <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78254	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, Billie G <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, Billie G <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 468/692 Rpt: 471/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, Billie G <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77062	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, Billie G <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, Billie G <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, Billie G <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, Billie G <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 469/692 Rpt: 472/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, Dee Ann <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78249	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, Dee Ann <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78249	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Social Worker		Employer (See Instructions) N/A
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, Kelly <hr/> Contributor address; City; State; Zip Code Houston, TX 77057	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul-Coker, Desmond <hr/> Contributor address; City; State; Zip Code Madera, CA 93636	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pavlov, Barbara <hr/> Contributor address; City; State; Zip Code Tomball, TX 77377	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 470/692 Rpt: 473/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pavlov, Barbara <hr/> 6 Contributor address; City; State; Zip Code Tomball, TX 77377	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pavlov, Barbara <hr/> Contributor address; City; State; Zip Code Tomball, TX 77377	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Payne, Barbara <hr/> Contributor address; City; State; Zip Code Austin, TX 78732	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peace, Tom <hr/> Contributor address; City; State; Zip Code Lockhart, TX 78644	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Nurseryman		Employer (See Instructions) Self-Employed
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peak, Susan <hr/> Contributor address; City; State; Zip Code Houston, TX 77005-1310	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 471/692 Rpt: 474/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peak, Susan <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77005-1310	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pearce, Barbara <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pearce, Barbara <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pearce, Barbara <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peckham, Julie <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) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 472/692 Rpt: 475/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pederson, Kara <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77092	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Penaloza, Sylvia <hr/> Contributor address; City; State; Zip Code El Paso, TX 79912	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Billing Coordinator		Employer (See Instructions) O'Melveny & Myers Llp
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Penfield, Janine <hr/> Contributor address; City; State; Zip Code Concord, MA 01742	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Penfield, Janine <hr/> Contributor address; City; State; Zip Code Concord, MA 01742	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Penfield, Janine <hr/> Contributor address; City; State; Zip Code Concord, MA 01742	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 473/692 Rpt: 476/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pennebaker, Ruth <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Writer		9 Employer (See Instructions) Self-Employed
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pennington, Debra <hr/> Contributor address; City; State; Zip Code Austin, TX 78716	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peoples, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78702	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perdido, Annabelle <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pereira, Susan <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 474/692 Rpt: 477/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pereira, Susan <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77019	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pereira, Susan <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pereira, Susan <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pereira, Susan <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Edward <hr/> Contributor address; City; State; Zip Code Dallas, TX 75238	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 475/692 Rpt: 478/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Kim <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75249	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Veronika <hr/> Contributor address; City; State; Zip Code Hurst, TX 76053	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez-Lozano, Eloisa <hr/> Contributor address; City; State; Zip Code League City, TX 77573	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez-Lozano, Eloisa <hr/> Contributor address; City; State; Zip Code League City, TX 77573	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perling, Raquel <hr/> Contributor address; City; State; Zip Code Austin, TX 78744	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 476/692 Rpt: 479/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Robin 6 Contributor address; City; State; Zip Code Buda, TX 78610	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Robin Contributor address; City; State; Zip Code Buda, TX 78610	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Robin Contributor address; City; State; Zip Code Buda, TX 78610	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Robin Contributor address; City; State; Zip Code Buda, TX 78610	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peter, Mary Contributor address; City; State; Zip Code Dallas, TX 75287	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 477/692 Rpt: 480/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peter, Mary 6 Contributor address; City; State; Zip Code Dallas, TX 75287	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peter, Mary Contributor address; City; State; Zip Code Dallas, TX 75287	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peters, Leo Contributor address; City; State; Zip Code San Antonio, TX 78230	Amount of Contribution (\$) \$54.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peters, Leo Contributor address; City; State; Zip Code San Antonio, TX 78230	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petty, Jim Contributor address; City; State; Zip Code Bryan, TX 77802	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 478/692 Rpt: 481/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petty, Jim <hr/> 6 Contributor address; City; State; Zip Code Bryan, TX 77802	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petty, Jim <hr/> Contributor address; City; State; Zip Code Bryan, TX 77802	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petty, Jim <hr/> Contributor address; City; State; Zip Code Bryan, TX 77802	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, John <hr/> Contributor address; City; State; Zip Code Katy, TX 77494	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) System Analyst		Employer (See Instructions) Pgs
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, John <hr/> Contributor address; City; State; Zip Code Katy, TX 77494	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) System Analyst		Employer (See Instructions) Pgs

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 479/692 Rpt: 482/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Tyler <hr/> 6 Contributor address; City; State; Zip Code Washington, DC 20002	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Communications Associate		9 Employer (See Instructions) Ward Circle Strategies
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pickett, Ileene <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierce, Christina <hr/> Contributor address; City; State; Zip Code Allen, TX 75002	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piner, Elizabeth <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) Planning Assistant		Employer (See Instructions) Nj Pinelands Commission
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piner, Elizabeth <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$22.00
Principal occupation / Job title (See Instructions) Planning Assistant		Employer (See Instructions) Nj Pinelands Commission

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 480/692 Rpt: 483/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piner, Elizabeth <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78729	7 Amount of Contribution (\$) \$22.00
8 Principal occupation / Job title (See Instructions) Planning Assistant		9 Employer (See Instructions) Nj Pinelands Commission
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piner, Elizabeth <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piner, Elizabeth <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piner, Elizabeth <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piner, Elizabeth <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 481/692 Rpt: 484/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piner, Elizabeth <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78729	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piner, Elizabeth <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piner, Elizabeth <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piner, Elizabeth <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piner, Elizabeth <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 482/692 Rpt: 485/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinheiro, April <hr/> 6 Contributor address; City; State; Zip Code Pleasanton, CA 94566	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Self-Employed
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinkerton, Saedra <hr/> Contributor address; City; State; Zip Code Dallas, TX 75243	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Pinkerton Legal
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinkerton, Saedra <hr/> Contributor address; City; State; Zip Code Dallas, TX 75243	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Pinkerton Legal
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinkerton, Saedra <hr/> Contributor address; City; State; Zip Code Dallas, TX 75243	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Pinkerton Legal
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinnelli, Janis W <hr/> Contributor address; City; State; Zip Code Austin, TX 78763	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) J Pinnelli Company Llc

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 483/692 Rpt: 486/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piper, Erin <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77077	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piper, Erin <hr/> Contributor address; City; State; Zip Code Houston, TX 77077	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Lead Regulatory Affairs Project Coordinator		Employer (See Instructions) Freeport Lng
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pitt, Wanda <hr/> Contributor address; City; State; Zip Code Cedar Hill, TX 75104	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pivonka, Kerry <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pizzo, Maria T <hr/> Contributor address; City; State; Zip Code Burleson, TX 76028	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) H Oil Gas

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 484/692 Rpt: 487/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pizzo, Maria T <hr/> 6 Contributor address; City; State; Zip Code Burleson, TX 76028	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Accountant		9 Employer (See Instructions) H Oil Gas
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pizzuti, Roseanne <hr/> Contributor address; City; State; Zip Code Yonkers, NY 10710	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pizzuti, Roseanne <hr/> Contributor address; City; State; Zip Code Yonkers, NY 10710	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Placek, George <hr/> Contributor address; City; State; Zip Code Elgin, TX 78621	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plant, Cynthia <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75006-7318	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Trts

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plant, Cynthia <hr/> 6 Contributor address; City; State; Zip Code Carrollton, TX 75006-7318	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Trts
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plant, Cynthia <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75006-7318	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Trts
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ploetz, Gregory <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76134	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ploetz, Gregory <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76134	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poe, Cyndi <hr/> Contributor address; City; State; Zip Code Smithville, TX 78957	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) School Bus Driver		Employer (See Instructions) Sisd

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 486/692 Rpt: 489/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poe, Cyndi <hr/> 6 Contributor address; City; State; Zip Code Smithville, TX 78957	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) School Bus Driver		9 Employer (See Instructions) Smithville Isd
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poole, Tammie <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78247	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Cashier		Employer (See Instructions) Heb
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porter, Candy <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porter, Candy <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porter, Candy <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 487/692 Rpt: 490/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porter, Caroline <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78702	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Architect		9 Employer (See Instructions) Porter Architecture And Design
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porter, Caroline <hr/> Contributor address; City; State; Zip Code Austin, TX 78702	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Porter Architecture And Design
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porter, Caroline <hr/> Contributor address; City; State; Zip Code Austin, TX 78702	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Porter Architecture And Design
Date 07/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porter, Catherine <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78251	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porter, Catherine <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78251	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porter, Catherine <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78251	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Portugal, David <hr/> Contributor address; City; State; Zip Code Bellaire, TX 77401	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Post, Nancy <hr/> Contributor address; City; State; Zip Code Waxahachie, TX 75165	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell, Celeste <hr/> Contributor address; City; State; Zip Code Hilltoplakes, TX 77871	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prater, Crystal <hr/> Contributor address; City; State; Zip Code Dayton, TX 77535	Amount of Contribution (\$) \$37.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prather, Deborah <hr/> 6 Contributor address; City; State; Zip Code Cedar Park, TX 78613	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Executive Assistant		9 Employer (See Instructions) The University Of Texas At Austin
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prather, Deborah <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Executive Assistant		Employer (See Instructions) The University Of Texas At Austin
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prather, Deborah <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Executive Assistant		Employer (See Instructions) The University Of Texas At Austin
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prevost, Ashley <hr/> Contributor address; City; State; Zip Code Austin, TX 78752	Amount of Contribution (\$) \$37.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Alexi <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76137	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Data Analyst		Employer (See Instructions) Jps Health Network

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Elizabeth <hr/> 6 Contributor address; City; State; Zip Code Brenham, TX 77833	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Architect		9 Employer (See Instructions) Upchurch Architects Inc.
Date 07/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Elizabeth <hr/> Contributor address; City; State; Zip Code Brenham, TX 77833	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Upchurch Architects Inc.
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Elizabeth <hr/> Contributor address; City; State; Zip Code Brenham, TX 77833	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Upchurch Architects Inc.
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Elizabeth <hr/> Contributor address; City; State; Zip Code Brenham, TX 77833	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Upchurch Architects Inc.
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Elizabeth <hr/> Contributor address; City; State; Zip Code Brenham, TX 77833	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Upchurch Architects Inc.

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 491/692 Rpt: 494/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Elizabeth <hr/> 6 Contributor address; City; State; Zip Code Brenham, TX 77833	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Architect		9 Employer (See Instructions) Upchurch Architects Inc.
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Printz, Barbara <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Printz, Barbara <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Printz, Barbara <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Procter-Smith, Marjorie <hr/> Contributor address; City; State; Zip Code Waxahachie, TX 75165	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Proll, Melissa <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77005	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pruitt, Helene <hr/> Contributor address; City; State; Zip Code Austin, TX 78751	Amount of Contribution (\$) \$56.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Przybyl Mciver, Kara <hr/> Contributor address; City; State; Zip Code Cypress, TX 77433	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pudder, Audrey <hr/> Contributor address; City; State; Zip Code Austin, TX 78737	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Realtor Broker		Employer (See Instructions) Audrey Pudder Realty Llc
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pullin, Majken <hr/> Contributor address; City; State; Zip Code Katy, TX 77450	Amount of Contribution (\$) \$3.50
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Micro Focus

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pumfrey, William Ross <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78736-3312	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Puntenney, Melissa <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Paralegal		Employer (See Instructions) Kent Sick
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Puntenney, Melissa <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Paralegal		Employer (See Instructions) Kent Sick
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Puntenney, Melissa <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Paralegal		Employer (See Instructions) Kent Sick
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Purdy, Shelly <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78256	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Purdy, Shelly <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78256	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Purdy, Shelly <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78256	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Putman, Stacy <hr/> Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Ineos
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Putman, Stacy <hr/> Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Ineos
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Putman, Stacy <hr/> Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Ineos

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Qualters, Heather <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76123	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quicksall, Amanda <hr/> Contributor address; City; State; Zip Code Dallas, TX 75223	Amount of Contribution (\$) \$49.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quinn, Mary <hr/> Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-Employed
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quinn, Shawn <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77479	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) R Hecht, Peter <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19147	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rae Gause, Charli <hr/> 6 Contributor address; City; State; Zip Code Amarillo, TX 79109	7 Amount of Contribution (\$) \$40.50
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raff, Ellen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75219	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raff, Ellen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75219	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raff, Ellen <hr/> Contributor address; City; State; Zip Code Cambridge, MA 02139	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ragsdale, Heidi <hr/> Contributor address; City; State; Zip Code Austin, TX 78758	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ragsdale, Heidi 6 Contributor address; City; State; Zip Code Austin, TX 78758	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rahim, Sania Contributor address; City; State; Zip Code Houston, TX 77030	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rainosek, Jackalyn Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self-Employed
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rainosek, Jackalyn Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self-Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rainosek, Jackalyn Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self-Employed

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rakowski, Susanne <hr/> 6 Contributor address; City; State; Zip Code Blanco, TX 78606-4415	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramos, Amanda <hr/> Contributor address; City; State; Zip Code Poteet, TX 78065	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsey, Nicole <hr/> Contributor address; City; State; Zip Code Elgin, TX 78621	Amount of Contribution (\$) \$23.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Randolph, Marjorie <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94710	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rankin, Megan <hr/> Contributor address; City; State; Zip Code Portland, OR 97229	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ravicz, Frances 6 Contributor address; City; State; Zip Code San Antonio, TX 78209	7 Amount of Contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ravicz, Frances Contributor address; City; State; Zip Code San Antonio, TX 78209	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ravicz, Frances Contributor address; City; State; Zip Code San Antonio, TX 78209	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ravicz, Frances Contributor address; City; State; Zip Code San Antonio, TX 78209	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ravicz, Frances Contributor address; City; State; Zip Code San Antonio, TX 78209	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ravicz, Frances 6 Contributor address; City; State; Zip Code San Antonio, TX 78209	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ravicz, Frances Contributor address; City; State; Zip Code San Antonio, TX 78209	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ray, Sheri Contributor address; City; State; Zip Code Sargent, TX 77414	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rayborn, Ann Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Intown Homes
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rayko, John Contributor address; City; State; Zip Code Schertz, TX 78154	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 501/692 Rpt: 504/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rayko, John <hr/> 6 Contributor address; City; State; Zip Code Schertz, TX 78154	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rayko, John <hr/> Contributor address; City; State; Zip Code Schertz, TX 78154	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rayman, Cierra <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$13.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raymond, Sandra <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reagan, Donna <hr/> Contributor address; City; State; Zip Code North Richland Hills, TX 76182	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rebeiz, Monica <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78757	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rebeiz, Monica <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rebeiz, Monica <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Red, Gayle <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Redman, Renae <hr/> Contributor address; City; State; Zip Code Hutto, TX 78635	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 503/692 Rpt: 506/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reed, Luke <hr/> 6 Contributor address; City; State; Zip Code Carrollton, TX 75007	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reed-Hill, Eve <hr/> Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Frisco Isd
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reeder, Betsy <hr/> Contributor address; City; State; Zip Code Woodway, TX 76712	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reeder, Betsy <hr/> Contributor address; City; State; Zip Code Woodway, TX 76712	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reeder, Betsy <hr/> Contributor address; City; State; Zip Code Woodway, TX 76712	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reeve, Lisa <hr/> 6 Contributor address; City; State; Zip Code Temple, TX 76502	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Veterinarian		9 Employer (See Instructions) Self-Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reeves, Marsha <hr/> Contributor address; City; State; Zip Code Kerrville, TX 78028-5512	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) N/A
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Regan, Rajal <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Register, Karen <hr/> Contributor address; City; State; Zip Code Santa Monica, CA 90402	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Register, Karen <hr/> Contributor address; City; State; Zip Code Santa Monica, CA 90402	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Register, Karen <hr/> 6 Contributor address; City; State; Zip Code Santa Monica, CA 90402	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Register, Karen <hr/> Contributor address; City; State; Zip Code Santa Monica, CA 90402	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Self-Employed
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Register, Karen <hr/> Contributor address; City; State; Zip Code Santa Monica, CA 90402	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Self-Employed
Date 09/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Register, Karen <hr/> Contributor address; City; State; Zip Code Santa Monica, CA 90402	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Self-Employed
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reichardt, Janet <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reichardt, Janet <hr/> 6 Contributor address; City; State; Zip Code Round Rock, TX 78664	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reinhart, Gail <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78202	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reinhart Etten, Janet <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reisman, Steven <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76132	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Technician		Employer (See Instructions) Mimaki Usa
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reisweg, Claire <hr/> Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self-Employed

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Remer, David <hr/> 6 Contributor address; City; State; Zip Code Spring Branch, TX 78070	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rentfro, Stephen <hr/> Contributor address; City; State; Zip Code Pleasanton, TX 78064	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Pisd
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reuter, Spencer <hr/> Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Revis, Lynne <hr/> Contributor address; City; State; Zip Code Houston, TX 77007	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes, Laurie <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78665	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Cynthia <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78704	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions) Self-Employed
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, John <hr/> Contributor address; City; State; Zip Code Azle, TX 76020	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Count Keepers
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, John <hr/> Contributor address; City; State; Zip Code Azle, TX 76020	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Count Keepers
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, John <hr/> Contributor address; City; State; Zip Code Azle, TX 76020	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Count Keepers
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, John <hr/> Contributor address; City; State; Zip Code Azle, TX 76020	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Count Keepers

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rezabek, Pat <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78628	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rezabek, Pat <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rezabek, Pat <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhine, Lisa <hr/> Contributor address; City; State; Zip Code Houston, TX 77042	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Healthcare Worker		Employer (See Instructions) Mhhs
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhodes, Mary Lynn <hr/> Contributor address; City; State; Zip Code Rockport, TX 78382	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rice, Conor <hr/> 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78412	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Advocacy Field Organizer		9 Employer (See Instructions) Tfn
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rice, Veronica <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard, Cheryl <hr/> Contributor address; City; State; Zip Code Austin, TX 78736	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard, Sherry <hr/> Contributor address; City; State; Zip Code Austin, TX 78736	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Board Member		Employer (See Instructions) Gulf Island Fabrication
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Glenn <hr/> Contributor address; City; State; Zip Code Austin, TX 78753	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Trainer		Employer (See Instructions) Travis County Counseling And Education Services

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Wendy <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Executive Assistant		9 Employer (See Instructions) State Of Texas
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Wendy <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Executive Assistant		Employer (See Instructions) State Of Texas
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Wendy <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Executive Assistant		Employer (See Instructions) State Of Texas
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richter, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78736	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rico, Gina <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77706	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riddle, Martha <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77063	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Martha Riddle
Date 09/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riemer, Kari <hr/> Contributor address; City; State; Zip Code Austin, TX 78728	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rifas, Shari <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94703	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rifas, Shari <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94703	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rifas, Shari <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94703	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 513/692 Rpt: 516/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riley, M Antonya <hr/> 6 Contributor address; City; State; Zip Code Dripping Springs, TX 78620	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Yoga Teacher		9 Employer (See Instructions) Self-Employed
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rinaldi, Nicola <hr/> Contributor address; City; State; Zip Code Lexington, MA 02421	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rinaldi, Nicola <hr/> Contributor address; City; State; Zip Code Lexington, MA 02421	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rinaldi, Nicola <hr/> Contributor address; City; State; Zip Code Lexington, MA 02421	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ring, Renee <hr/> Contributor address; City; State; Zip Code Manhattan, NY 10028	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) COO		Employer (See Instructions) Efcg

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riojas, Margaret <hr/> 6 Contributor address; City; State; Zip Code Baytown, TX 77520	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Municipal Accountant		9 Employer (See Instructions) Harris County
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Risk, Nancy <hr/> Contributor address; City; State; Zip Code Austin, TX 78767	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self-Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rittenhouse, Carolina <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76110	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivera, Sandy <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78415	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Supervisor		Employer (See Instructions) Texas Lottery Commission
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivera, Sandy <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78415	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Supervisor		Employer (See Instructions) Texas Lottery Commission

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 515/692 Rpt: 518/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivera, Sandy <hr/> 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78415	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Supervisor		9 Employer (See Instructions) Texas Lottery Commission
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivera, Tina <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78250	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Dsca
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivers, Constance <hr/> Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivers, Constance <hr/> Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivers, Constance <hr/> Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 516/692 Rpt: 519/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roadhouse, Jeanine <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78759-5525	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robb, Hannah <hr/> Contributor address; City; State; Zip Code Houston, TX 77004	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self-Employed
Date 08/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robb, Hannah <hr/> Contributor address; City; State; Zip Code Houston, TX 77004	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self-Employed
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robb, Hannah <hr/> Contributor address; City; State; Zip Code Houston, TX 77004	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self-Employed
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robbins, Ruth <hr/> Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 517/692 Rpt: 520/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robeniol, Shelley <hr/> 6 Contributor address; City; State; Zip Code Frisco, TX 75034	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions) Self-Employed
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Amie <hr/> Contributor address; City; State; Zip Code Spring, TX 77386	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Hairdresserself		Employer (See Instructions) Self-Employed
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Amie <hr/> Contributor address; City; State; Zip Code Spring, TX 77386	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Hairdresserself		Employer (See Instructions) Self-Employed
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Stacy <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Leanderisd
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts Havard, Kristy <hr/> Contributor address; City; State; Zip Code La Porte, TX 77571	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Deer Park.Isd

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 518/692 Rpt: 521/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts Havard, Kristy 6 Contributor address; City; State; Zip Code La Porte, TX 77571	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Educator		9 Employer (See Instructions) Deer Park.Isd
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts Havard, Kristy Contributor address; City; State; Zip Code La Porte, TX 77571	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Deer Park.Isd
Date 07/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robertson, Carole Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robertson, Carole Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robertson, Carole Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 519/692 Rpt: 522/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robichaux, Philippe <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78209	7 Amount of Contribution (\$) \$22.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Beverly <hr/> Contributor address; City; State; Zip Code Houston, TX 77024	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Monika <hr/> Contributor address; City; State; Zip Code Dallas, TX 75240	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Irving Isd
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Monika <hr/> Contributor address; City; State; Zip Code Dallas, TX 75240	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Irving Isd
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Monika <hr/> Contributor address; City; State; Zip Code Dallas, TX 75240	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Irving Isd

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 520/692 Rpt: 523/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Sally <hr/> 6 Contributor address; City; State; Zip Code Galveston, TX 77550	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Utmb
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Sally <hr/> Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Utmb
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Sally <hr/> Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Utmb
Date 07/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Sally <hr/> Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Utmb
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Sally <hr/> Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Utmb

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 521/692 Rpt: 524/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Sally <hr/> 6 Contributor address; City; State; Zip Code Galveston, TX 77550	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Utmb
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Sally <hr/> Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Utmb
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Sally <hr/> Contributor address; City; State; Zip Code Galveston, TX 77550	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Utmb
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78737	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Virginia <hr/> Contributor address; City; State; Zip Code Newton Centre, MA 02459	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 522/692 Rpt: 525/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Virginia <hr/> 6 Contributor address; City; State; Zip Code Newton Centre, MA 02459	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rocchio, Laura <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76308-1105	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roche, Sylvia <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78201	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rochek-Roberts, Shawn <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roehen, Shari <hr/> Contributor address; City; State; Zip Code Houston, TX 77005	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Veteran'S Health Administration

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 523/692 Rpt: 526/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodgers, Betty <hr/> 6 Contributor address; City; State; Zip Code Mckinney, TX 75069	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodgers, Paula A <hr/> Contributor address; City; State; Zip Code Rowlett, TX 75088	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Instructor		Employer (See Instructions) Collin College
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodgers, Ron <hr/> Contributor address; City; State; Zip Code Austin, TX 78742	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodich, Tanya <hr/> Contributor address; City; State; Zip Code Gwynn Oak, MD 21207-3853	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodich, Tanya <hr/> Contributor address; City; State; Zip Code Gwynn Oak, MD 21207-3853	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 524/692 Rpt: 527/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodich, Tanya <hr/> 6 Contributor address; City; State; Zip Code Gwynn Oak, MD 21207-3853	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodich, Tanya <hr/> Contributor address; City; State; Zip Code Gwynn Oak, MD 21207-3853	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodich, Tanya <hr/> Contributor address; City; State; Zip Code Gwynn Oak, MD 21207-3853	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodich, Tanya <hr/> Contributor address; City; State; Zip Code Gwynn Oak, MD 21207-3853	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodich, Tanya <hr/> Contributor address; City; State; Zip Code Gwynn Oak, MD 21207-3853	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 525/692 Rpt: 528/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodich, Tanya <hr/> 6 Contributor address; City; State; Zip Code Gwynn Oak, MD 21207-3853	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodich, Tanya <hr/> Contributor address; City; State; Zip Code Gwynn Oak, MD 21207-3853	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodich, Tanya <hr/> Contributor address; City; State; Zip Code Gwynn Oak, MD 21207-3853	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodich, Tanya <hr/> Contributor address; City; State; Zip Code Gwynn Oak, MD 21207-3853	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Geri <hr/> Contributor address; City; State; Zip Code Austin, TX 78738	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 526/692 Rpt: 529/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Susan <hr/> 6 Contributor address; City; State; Zip Code Fredericksburg, TX 78624	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Susan <hr/> Contributor address; City; State; Zip Code Fredericksburg, TX 78624	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Susan <hr/> Contributor address; City; State; Zip Code Fredericksburg, TX 78624	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Teri <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) N/A
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Teri <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) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 527/692 Rpt: 530/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Teri <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78757	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roeder, Shelly <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Barry <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Caci Nss Inc.
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Barry <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Caci Nss Inc.
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Barry <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Caci Nss Inc.

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 528/692 Rpt: 531/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Brenda <hr/> 6 Contributor address; City; State; Zip Code Thousand Oaks, CA 91362	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Miranda <hr/> Contributor address; City; State; Zip Code Austin, TX 78724	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rohrman, Sarah <hr/> Contributor address; City; State; Zip Code Dallas, TX 75228	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rolf, Susannah <hr/> Contributor address; City; State; Zip Code Missouri City, TX 77459	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Social Worker		Employer (See Instructions) Thriveworks
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rolles, Korin <hr/> Contributor address; City; State; Zip Code Bethel Park, PA 15102-2427	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roper, Mary <hr/> 6 Contributor address; City; State; Zip Code Lake Dallas, TX 75065	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rose, Gloria <hr/> Contributor address; City; State; Zip Code Garland, TX 75042	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Dell
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rose, Leilani <hr/> Contributor address; City; State; Zip Code Austin, TX 78753	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rose, Leilani <hr/> Contributor address; City; State; Zip Code Austin, TX 78753	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rose, Leilani <hr/> Contributor address; City; State; Zip Code Austin, TX 78753	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 530/692 Rpt: 533/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosen, Ilene <hr/> 6 Contributor address; City; State; Zip Code Floral Park, NY 11005	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Business Executive		9 Employer (See Instructions) Hamburger Woolen Co.
Date 07/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosen, Ilene <hr/> Contributor address; City; State; Zip Code Floral Park, NY 11005	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Business Executive		Employer (See Instructions) Hamburger Woolen Co.
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosen, Ilene <hr/> Contributor address; City; State; Zip Code Floral Park, NY 11005	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Business Executive		Employer (See Instructions) Hamburger Woolen Co.
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosen, Ilene <hr/> Contributor address; City; State; Zip Code Floral Park, NY 11005	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Business Executive		Employer (See Instructions) Hamburger Woolen Co.
Date 08/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosen, Ilene <hr/> Contributor address; City; State; Zip Code Floral Park, NY 11005	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Business Executive		Employer (See Instructions) Hamburger Woolen Co.

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 531/692 Rpt: 534/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosen, Ilene <hr/> 6 Contributor address; City; State; Zip Code Floral Park, NY 11005	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Business Executive		9 Employer (See Instructions) Hamburger Woolen Co.
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosen, Ilene <hr/> Contributor address; City; State; Zip Code Floral Park, NY 11005	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Business Executive		Employer (See Instructions) Hamburger Woolen Co.
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosen, Ilene <hr/> Contributor address; City; State; Zip Code Floral Park, NY 11005	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Business Executive		Employer (See Instructions) Hamburger Woolen Co.
Date 09/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosen, Ilene <hr/> Contributor address; City; State; Zip Code Floral Park, NY 11005	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Business Executive		Employer (See Instructions) Hamburger Woolen Co.
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosen, Ilene <hr/> Contributor address; City; State; Zip Code Floral Park, NY 11005	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Business Executive		Employer (See Instructions) Hamburger Woolen Co.

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 532/692 Rpt: 535/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenblit, Julia <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75206	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rouda, Jennifer <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Social Worker		Employer (See Instructions) Aspen Hospice
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roush, Michael <hr/> Contributor address; City; State; Zip Code Longmont, CO 80537	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rovang, Roberta <hr/> Contributor address; City; State; Zip Code Plano, TX 75074	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rubin, Lesley <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78259-2151	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 533/692 Rpt: 536/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rubin, Lesley <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78259-2151	7 Amount of Contribution (\$) <div style="text-align: right;">\$25.00</div>
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rubin, Lesley <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78259-2151	Amount of Contribution (\$) <div style="text-align: right;">\$10.00</div>
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruff, Linda <hr/> Contributor address; City; State; Zip Code Bacliff, TX 77518	Amount of Contribution (\$) <div style="text-align: right;">\$5.00</div>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruff, Linda <hr/> Contributor address; City; State; Zip Code Bacliff, TX 77518	Amount of Contribution (\$) <div style="text-align: right;">\$5.00</div>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruff, Linda <hr/> Contributor address; City; State; Zip Code Bacliff, TX 77518	Amount of Contribution (\$) <div style="text-align: right;">\$5.00</div>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 534/692 Rpt: 537/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rusch, Kirby <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78223	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rush, Fran <hr/> Contributor address; City; State; Zip Code Austin, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Cinda <hr/> Contributor address; City; State; Zip Code Gordonville, TX 76245	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Cinda <hr/> Contributor address; City; State; Zip Code Gordonville, TX 76245	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Elizabeth <hr/> Contributor address; City; State; Zip Code Spokane, WA 99201	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Joseph <hr/> 6 Contributor address; City; State; Zip Code Los Angeles, CA 90042	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Joseph <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90042	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Joseph <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90042	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rust, Tami <hr/> Contributor address; City; State; Zip Code Bertram, TX 78605-3643	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) It Project Manager		Employer (See Instructions) Leander Isd
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryder, Ann <hr/> Contributor address; City; State; Zip Code Southlake, TX 76092	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 536/692 Rpt: 539/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryder, Ann <hr/> 6 Contributor address; City; State; Zip Code Southlake, TX 76092	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryder, Nicole <hr/> Contributor address; City; State; Zip Code Houston, TX 77094	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saavedra, Irasema <hr/> Contributor address; City; State; Zip Code Cypress, TX 77429	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sabatini, Joseph <hr/> Contributor address; City; State; Zip Code Albuquerque, NM 87107	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saenz, Velia <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78228	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saenz, Velia <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78228	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salmatanis, Erin <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77381	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salomon, Linda <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salomon, Linda <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salter, Carolyn <hr/> Contributor address; City; State; Zip Code Palestine, TX 75801	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self-Employed

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salvato, Michael <hr/> 6 Contributor address; City; State; Zip Code Porter, TX 77365	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Samford, Karen <hr/> Contributor address; City; State; Zip Code Frisco, TX 75033	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Self-Employed
Date 09/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Samford, Karen <hr/> Contributor address; City; State; Zip Code Frisco, TX 75033	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Self-Employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sammann, Patricia <hr/> Contributor address; City; State; Zip Code Urbana, IL 61801	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sammann, Patricia <hr/> Contributor address; City; State; Zip Code Urbana, IL 61801	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Samson, Sharon <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77095	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) San Marco, Elizabeth <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78228	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Julie <hr/> Contributor address; City; State; Zip Code Canyon Lake, TX 78133	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Leesa <hr/> Contributor address; City; State; Zip Code Houston, TX 77007	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Nancy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229	Amount of Contribution (\$) \$2,022.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Nancy <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75229	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Nancy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229	Amount of Contribution (\$) \$2,022.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Nancy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229	Amount of Contribution (\$) \$2,022.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78747	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78747	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandoval, Gina <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78249	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Scrum Master		9 Employer (See Instructions) Usaa
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandoval, Gina <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78249	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Scrum Master		Employer (See Instructions) Usaa
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandoval, Gina <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78249	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Scrum Master		Employer (See Instructions) Usaa
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandoval, Gina <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78249	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Scrum Master		Employer (See Instructions) Usaa
Date 07/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandoval, Monica <hr/> Contributor address; City; State; Zip Code Houston, TX 77008	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 542/692 Rpt: 545/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandoval, Monica <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77008	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandoval, Monica <hr/> Contributor address; City; State; Zip Code Houston, TX 77008	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandoval, Nayelli <hr/> Contributor address; City; State; Zip Code League City, TX 77573	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Financial Examiner		Employer (See Instructions) Texas Occc
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanford, Jane <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanford, Teresa <hr/> Contributor address; City; State; Zip Code Euless, TX 76039	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Sr Project Manager		Employer (See Instructions) Haystackid

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanford, Teresa <hr/> 6 Contributor address; City; State; Zip Code Euless, TX 76039	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Sr Project Manager		9 Employer (See Instructions) Haystackid
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanns, Cynthia <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78213	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Sw Manager		Employer (See Instructions) Uthscsa
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sansbury, Matthew <hr/> Contributor address; City; State; Zip Code Manchaca, TX 78652	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Programmer		Employer (See Instructions) Self-Employed
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santos Farry, Laura <hr/> Contributor address; City; State; Zip Code Austin, TX 78737	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santos-Farry, Laura <hr/> Contributor address; City; State; Zip Code Austin, TX 78737	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sarr, Julia <hr/> 6 Contributor address; City; State; Zip Code Manassas, VA 20109	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sarr, Julia <hr/> Contributor address; City; State; Zip Code Manassas, VA 20109	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sarris, Sandra <hr/> Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saso, Heather <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saval, Maureen <hr/> Contributor address; City; State; Zip Code Leander, TX 78641-3654	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saval, Maureen <hr/> 6 Contributor address; City; State; Zip Code Leander, TX 78641-3654	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sawyer, Benjamin <hr/> Contributor address; City; State; Zip Code Freeport, ME 04032	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scarborough, Megan <hr/> Contributor address; City; State; Zip Code Austin, TX 78722	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Staff		Employer (See Instructions) Ut Austin
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schaeffer, Shirley <hr/> Contributor address; City; State; Zip Code La Grange, TX 78945	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schell, Patricia <hr/> Contributor address; City; State; Zip Code Houston, TX 77096	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) It Consultant		Employer (See Instructions) Self-Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 546/692 Rpt: 549/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schell, Patricia <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77096	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) It Consultant		9 Employer (See Instructions) Self-Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schell, Patricia <hr/> Contributor address; City; State; Zip Code Houston, TX 77096	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) It Consultant		Employer (See Instructions) Self-Employed
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schieffer, Shelly <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schlachter, Deborah <hr/> Contributor address; City; State; Zip Code Lancaster, TX 75134	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schlechter, Elizabeth <hr/> Contributor address; City; State; Zip Code Steamboat Springs, CO 80487	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schlembach, Kay <hr/> 6 Contributor address; City; State; Zip Code Richmond, VA 23221	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schleuning, Maria <hr/> Contributor address; City; State; Zip Code Dallas, TX 75218	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Musician		Employer (See Instructions) Dallas Symphony
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmertz, Kelsey <hr/> Contributor address; City; State; Zip Code Austin, TX 78745-2927	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidli, Lisette <hr/> Contributor address; City; State; Zip Code Austin, TX 78730	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Donna <hr/> Contributor address; City; State; Zip Code Jackson Township, NJ 08527-3725	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Special Education Teacher		Employer (See Instructions) Jackson Board Of Education

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Donna <hr/> 6 Contributor address; City; State; Zip Code Jackson Township, NJ 08527-3725	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Special Education Teacher		9 Employer (See Instructions) Jackson Board Of Education
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Donna <hr/> Contributor address; City; State; Zip Code Jackson Township, NJ 08527-3725	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Special Education Teacher		Employer (See Instructions) Jackson Board Of Education
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Suzanne <hr/> Contributor address; City; State; Zip Code Monterey, CA 93940	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schnabel, Judy <hr/> Contributor address; City; State; Zip Code Port Charlotte, FL 33980	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schneider, Becky <hr/> Contributor address; City; State; Zip Code El Paso, TX 79911	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schneider, John <hr/> 6 Contributor address; City; State; Zip Code Plano, TX 75074	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Administrative Patent Judge		9 Employer (See Instructions) Uspto
Date 07/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schoonover, Carla <hr/> Contributor address; City; State; Zip Code Palo Pinto, TX 76484	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Professional		Employer (See Instructions) Tmi
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schoonover, Carla <hr/> Contributor address; City; State; Zip Code Palo Pinto, TX 76484	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Professional		Employer (See Instructions) Tmi
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schoonover, Carla <hr/> Contributor address; City; State; Zip Code Palo Pinto, TX 76484	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Professional		Employer (See Instructions) Tmi
Date 07/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schoppe, Marjorie <hr/> Contributor address; City; State; Zip Code Leander, TX 78641	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schoppe, Marjorie <hr/> 6 Contributor address; City; State; Zip Code Leander, TX 78641	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schreiber, Emily <hr/> Contributor address; City; State; Zip Code Houston, TX 77025	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schriefer, Jill <hr/> Contributor address; City; State; Zip Code Frisco, TX 75036	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schriefer, Robin <hr/> Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schrock, Jacque <hr/> Contributor address; City; State; Zip Code Fulshear, TX 77441	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schubert, Lois <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78749	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuenaman, Judy <hr/> Contributor address; City; State; Zip Code Austin, TX 78734	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulman, Chris <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulman, Chris <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schultz, Karen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75287	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schultz, Mary <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77009	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schultz, Mary <hr/> Contributor address; City; State; Zip Code Houston, TX 77009	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schultz, Mary <hr/> Contributor address; City; State; Zip Code Houston, TX 77009	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwarz, Pam <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwarz, Pam <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwarz, Rhoda <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78731	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scoggin, Helen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75211	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scoggin, Helen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75211	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Anne <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78412	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Cheryl <hr/> Contributor address; City; State; Zip Code Roanoke, TX 76262	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, E P <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78633	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Erin <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78250	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, William <hr/> Contributor address; City; State; Zip Code Benicia, CA 94510	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sebesta, Vickie <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sebesta, Vickie <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seegmiller, Megan 6 Contributor address; City; State; Zip Code Coppell, TX 75019	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seigman, Melissa Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Selby, Mary Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Selig, Carol Contributor address; City; State; Zip Code Houston, TX 77096	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sellers, Sandra Contributor address; City; State; Zip Code Brea, CA 92823	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sellers, Tracy <hr/> 6 Contributor address; City; State; Zip Code Rowlett, TX 75030	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Educator		9 Employer (See Instructions) Self-Employed
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sellers, Tracy <hr/> Contributor address; City; State; Zip Code Rowlett, TX 75030	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Self-Employed
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sellers, Tracy <hr/> Contributor address; City; State; Zip Code Rowlett, TX 75030	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Self-Employed
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sells, Greg <hr/> Contributor address; City; State; Zip Code Austin, TX 78741	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Civil Service		Employer (See Instructions) Internal Revenue Service
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sepulveda, Katherine <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78269-2404	Amount of Contribution (\$) \$90.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sepulveda-Allen, Kate <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78240	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) RN		9 Employer (See Instructions) Alamo Lung Institute
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Serr, Kathy <hr/> Contributor address; City; State; Zip Code China Spring, TX 76633	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Advocacy Program Coordinator		Employer (See Instructions) Baylor Law School
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seymour, Sally <hr/> Contributor address; City; State; Zip Code Larkspur, CA 94939	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seymour, Sally <hr/> Contributor address; City; State; Zip Code Larkspur, CA 94939	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seymour, Sally <hr/> Contributor address; City; State; Zip Code Larkspur, CA 94939	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaddix, Mallory <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77024	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shank Coviello, Jessica <hr/> Contributor address; City; State; Zip Code Spring, TX 77389	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Assoc Dean		Employer (See Instructions) Uth
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shanklin-Spock, Heidi <hr/> Contributor address; City; State; Zip Code Austin, TX 78735	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Aging Life Care Manager		Employer (See Instructions) Spock Care Management Llc
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shapiro, Suzanne <hr/> Contributor address; City; State; Zip Code Chicago, IL 60645	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharp, Cynthia <hr/> Contributor address; City; State; Zip Code Irving, TX 75061	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 559/692 Rpt: 562/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharphorn, Ellen <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78731	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharphorn, Ellen <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharphorn, Ellen <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharphorn, Ellen <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharphorn, Ellen <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 560/692 Rpt: 563/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharphorn, Ellen <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78731	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharphorn, Ellen <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharphorn, Ellen <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharphorn, Ellen <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharphorn, Ellen <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 561/692 Rpt: 564/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shatto, Misty <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76107	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Human Resources		9 Employer (See Instructions) Alcon
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shattuck, Lola <hr/> Contributor address; City; State; Zip Code Seguin, TX 78155	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shattuck, Lola <hr/> Contributor address; City; State; Zip Code Seguin, TX 78155	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shattuck, Lola <hr/> Contributor address; City; State; Zip Code Seguin, TX 78155	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shattuck, Lola <hr/> Contributor address; City; State; Zip Code Seguin, TX 78155	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 562/692 Rpt: 565/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shattuck, Lola <hr/> 6 Contributor address; City; State; Zip Code Seguin, TX 78155	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shattuck, Lola <hr/> Contributor address; City; State; Zip Code Seguin, TX 78155	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Pamela <hr/> Contributor address; City; State; Zip Code Floresville, TX 78114	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Pamela <hr/> Contributor address; City; State; Zip Code Floresville, TX 78114	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheahan, Colleen <hr/> Contributor address; City; State; Zip Code Houston, TX 77041	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shelley, Dorothy <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78753	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shepperd, Robin <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shepperd, Robin <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shields, Judith <hr/> Contributor address; City; State; Zip Code Belton, TX 76513	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shipley-Crow, Lynn <hr/> Contributor address; City; State; Zip Code Bloomington, IN 47403	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shipley-Crow, Lynn <hr/> 6 Contributor address; City; State; Zip Code Bloomington, IN 47403	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shipley-Crow, Lynn <hr/> Contributor address; City; State; Zip Code Bloomington, IN 47403	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shore, James <hr/> Contributor address; City; State; Zip Code Ames, IA 50010	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Pilot		Employer (See Instructions) Southwest Airlines
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Short, Lisa <hr/> Contributor address; City; State; Zip Code New Braunfels, TX 78130	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Short, Sara <hr/> Contributor address; City; State; Zip Code Lufkin, TX 75904	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 565/692 Rpt: 568/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Short, Sara <hr/> 6 Contributor address; City; State; Zip Code Lufkin, TX 75904	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Short, Sara <hr/> Contributor address; City; State; Zip Code Lufkin, TX 75904	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shumate, Katie <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76102	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sibley, Rose <hr/> Contributor address; City; State; Zip Code Meadows Place, TX 77477	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siemers-Kennedy, Laura <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Mott Macdonald

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siemers-Kennedy, Laura <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77019	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Mott Macdonald
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siemers-Kennedy, Laura <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Mott Macdonald
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sihsobhon, Thamnu <hr/> Contributor address; City; State; Zip Code Potomac, MD 20854-2220	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silkworth, Kathleen <hr/> Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siller, Sarah <hr/> Contributor address; City; State; Zip Code Austin, TX 78758	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 567/692 Rpt: 570/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sim, Stephanie 6 Contributor address; City; State; Zip Code Sugar Land, TX 77479	7 Amount of Contribution (\$) \$16.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sim, Stephanie Contributor address; City; State; Zip Code Sugar Land, TX 77479	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Stephanie C. Sim M.D. P.A.
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sim, Stephanie Contributor address; City; State; Zip Code Sugar Land, TX 77479	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Stephanie C. Sim M.D. P.A.
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simecek, Diane Contributor address; City; State; Zip Code Yorktown, TX 78164	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simecek, Diane Contributor address; City; State; Zip Code Yorktown, TX 78164	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simecek, Diane <hr/> 6 Contributor address; City; State; Zip Code Yorktown, TX 78164	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simecek, Diane <hr/> Contributor address; City; State; Zip Code Yorktown, TX 78164	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simon, Evelyn <hr/> Contributor address; City; State; Zip Code New York, NY 10009	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simon, Roberta <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simpson-Weeks, Elizabeth <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 569/692 Rpt: 572/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Singhal, Uma <hr/> 6 Contributor address; City; State; Zip Code Phoenix, AZ 85016	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sinha, Shekhar <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78259	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sinha, Shekhar <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78259	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sinha, Shekhar <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78259	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sinton, Wendy C <hr/> Contributor address; City; State; Zip Code Palo Alto, CA 94301	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 570/692 Rpt: 573/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sinton, Wendy C <hr/> 6 Contributor address; City; State; Zip Code Palo Alto, CA 94301	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sites, Tracy <hr/> Contributor address; City; State; Zip Code Wimberley, TX 78676	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skelton, Marci <hr/> Contributor address; City; State; Zip Code Cleburne, TX 76033-6962	Amount of Contribution (\$) \$15.55
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skelton, Marci <hr/> Contributor address; City; State; Zip Code Cleburne, TX 76033-6962	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skelton, Marci <hr/> Contributor address; City; State; Zip Code Cleburne, TX 76033-6962	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 571/692 Rpt: 574/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skelton, Marci <hr/> 6 Contributor address; City; State; Zip Code Cleburne, TX 76033-6962	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skeuse, Megan <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skipton, Susan <hr/> Contributor address; City; State; Zip Code Houston, TX 77077	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slagter, Janice <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slater, Cynthia <hr/> Contributor address; City; State; Zip Code Danbury, CT 06810	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sloan, Jane <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75211	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Leonard Sloan And Associates Inc.
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Small, Melanie <hr/> Contributor address; City; State; Zip Code Houston, TX 77056	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Small, Melanie <hr/> Contributor address; City; State; Zip Code Houston, TX 77056	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Brian <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Daniel <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75070	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Corporate Communications		Employer (See Instructions) Ntt Data

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Diann <hr/> 6 Contributor address; City; State; Zip Code Richardson, TX 75080	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Veterinarian		9 Employer (See Instructions) Anim.Med.Centerofrichardson
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Diann <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Veterinarian		Employer (See Instructions) Animal Medical Center Of Richardson
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Diann <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Veterinarian		Employer (See Instructions) Animal Medical Center Of Richardson
Date 07/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Dianne <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75071	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Dianne <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75071	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 574/692 Rpt: 577/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Dianne 6 Contributor address; City; State; Zip Code Mckinney, TX 75071	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Jane Contributor address; City; State; Zip Code Frisco, TX 75034	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Jane Contributor address; City; State; Zip Code Frisco, TX 75034	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Karen Contributor address; City; State; Zip Code Mabank, TX 75147	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Karen Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 575/692 Rpt: 578/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Karen <hr/> 6 Contributor address; City; State; Zip Code Mabank, TX 75147	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Karen <hr/> Contributor address; City; State; Zip Code Mabank, TX 75147	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Kay <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75011	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Administrative Assistant		Employer (See Instructions) Cactus Computer Inc
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Lori <hr/> Contributor address; City; State; Zip Code Dallas, TX 75206	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Mary <hr/> Contributor address; City; State; Zip Code Midland, TX 79701	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 576/692 Rpt: 579/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Mary <hr/> 6 Contributor address; City; State; Zip Code Midland, TX 79701	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Mary <hr/> Contributor address; City; State; Zip Code Midland, TX 79701	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Mary <hr/> Contributor address; City; State; Zip Code Midland, TX 79701	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Mary <hr/> Contributor address; City; State; Zip Code Midland, TX 79701	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Meg <hr/> Contributor address; City; State; Zip Code Flower Mound, TX 75028	Amount of Contribution (\$) \$54.55
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 577/692 Rpt: 580/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Nanci <hr/> 6 Contributor address; City; State; Zip Code New Braunfels, TX 78130	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Instructional Designer		9 Employer (See Instructions) Ulta Beuty
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Natalie <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Paula <hr/> Contributor address; City; State; Zip Code Missouri City, TX 77459	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Raevyn <hr/> Contributor address; City; State; Zip Code Euless, TX 76040	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Na
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Raevyn <hr/> Contributor address; City; State; Zip Code Euless, TX 76040	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Na

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 578/692 Rpt: 581/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Raevyn <hr/> 6 Contributor address; City; State; Zip Code Euless, TX 76040	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Na
Date 08/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Stacey <hr/> Contributor address; City; State; Zip Code Houston, TX 77069	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Stacey <hr/> Contributor address; City; State; Zip Code Austin, TX 78721	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Austin Isd
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Stacey <hr/> Contributor address; City; State; Zip Code Austin, TX 78721	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Austin Isd
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Stacey <hr/> Contributor address; City; State; Zip Code Austin, TX 78721	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Austin Isd

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 579/692 Rpt: 582/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, William 6 Contributor address; City; State; Zip Code Houston, TX 77008	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, William Contributor address; City; State; Zip Code Houston, TX 77008	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith-Dalenberg, Holly Contributor address; City; State; Zip Code Houston, TX 77059	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snyder, David Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Researcher		Employer (See Instructions) Texas State University At San Marcos
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soechting, Kim Contributor address; City; State; Zip Code Buchanan Dam, TX 78609	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 580/692 Rpt: 583/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sohlman, Tara <hr/> 6 Contributor address; City; State; Zip Code Allen, TX 75013	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Cooper & Scully
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sokolow, Molly <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Solender, Tom <hr/> Contributor address; City; State; Zip Code Dallas, TX 75209	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Solis, Stacy <hr/> Contributor address; City; State; Zip Code Mcallen, TX 78501	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) College Instructor		Employer (See Instructions) Utrgv
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Solis, Stacy <hr/> Contributor address; City; State; Zip Code Mcallen, TX 78501	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) College Instructor		Employer (See Instructions) Utrgv

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 581/692 Rpt: 584/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Solis, Stacy <hr/> 6 Contributor address; City; State; Zip Code Mcallen, TX 78501	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) College Instructor		9 Employer (See Instructions) Utrgv
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sones, Beverly <hr/> Contributor address; City; State; Zip Code Driftwood, TX 78619-4492	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sones, Beverly <hr/> Contributor address; City; State; Zip Code Driftwood, TX 78619-4492	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Songy, Lisa <hr/> Contributor address; City; State; Zip Code Dallas, TX 75238	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Tollefson Bradley Mitchell & Melendi
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sosa-Powell, Lana <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soto, Pascual <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75227	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Nurse		9 Employer (See Instructions) Utsw
Date 09/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soto, Pascual <hr/> Contributor address; City; State; Zip Code Dallas, TX 75227	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Utsw
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) South, Debra <hr/> Contributor address; City; State; Zip Code Canyon Lake, TX 78133	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sowell, Monica <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Higher Education Program Director		Employer (See Instructions) South University
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sowell, Monica <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Higher Education Program Director		Employer (See Instructions) South University

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SCHEDULE A1

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sowell, Monica <hr/> 6 Contributor address; City; State; Zip Code Round Rock, TX 78681	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Higher Education Program Director		9 Employer (See Instructions) South University
Date 08/31/2024	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 (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/07/2024	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 (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/14/2024	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 (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/21/2024	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 (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 584/692 Rpt: 587/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/28/2024	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 (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/28/2024	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 (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/29/2024	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 (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sparkevicius, Andrea <hr/> Contributor address; City; State; Zip Code Las Cruces, NM 88011	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Speck, Angela <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78255	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Astrophysicist/Professor		Employer (See Instructions) Utsa

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SCHEDULE A1

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Speck, Angela <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78255	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Astrophysicist/Professor		9 Employer (See Instructions) Utsa
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Speck, Angela <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78255	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Astrophysicist/Professor		Employer (See Instructions) Utsa
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spencer, Barbara <hr/> Contributor address; City; State; Zip Code North Richland Hills, TX 76182	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spencer, Cathy <hr/> Contributor address; City; State; Zip Code Frisco, TX 75034	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spencer, Cathy <hr/> Contributor address; City; State; Zip Code Frisco, TX 75034	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 586/692 Rpt: 589/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spinks, Martha 6 Contributor address; City; State; Zip Code San Antonio, TX 78216-1625	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spinks, Martha Contributor address; City; State; Zip Code San Antonio, TX 78216-1625	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spinks, Martha Contributor address; City; State; Zip Code San Antonio, TX 78216-1625	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spinks, Martha Contributor address; City; State; Zip Code San Antonio, TX 78216-1625	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spinks, Martha Contributor address; City; State; Zip Code San Antonio, TX 78216-1625	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 587/692 Rpt: 590/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spinks, Martha <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78216-1625	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spradlin, Lisa <hr/> Contributor address; City; State; Zip Code Spring Branch, TX 78070	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Systems Admin		Employer (See Instructions) Farm Credit Bank Of Texas
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spradlin, Lisa <hr/> Contributor address; City; State; Zip Code Spring Branch, TX 78070	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Systems Admin		Employer (See Instructions) Farm Credit Bank Of Texas
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spradlin, Lisa <hr/> Contributor address; City; State; Zip Code Spring Branch, TX 78070	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Systems Admin		Employer (See Instructions) Farm Credit Bank Of Texas
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sroka, Landa <hr/> Contributor address; City; State; Zip Code Chandler, AZ 85286	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 588/692 Rpt: 591/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) St.Clair, Ann <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78732	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stach, Barbara <hr/> Contributor address; City; State; Zip Code Leander, TX 78641	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stach, Barbara <hr/> Contributor address; City; State; Zip Code Leander, TX 78641	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stahl, M S <hr/> Contributor address; City; State; Zip Code Denton, TX 76209	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Staley, Stephanie <hr/> Contributor address; City; State; Zip Code Highland Village, TX 75077	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Human Resources		Employer (See Instructions) Allstate

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 589/692 Rpt: 592/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Staley, Stephanie <hr/> 6 Contributor address; City; State; Zip Code Highland Village, TX 75077	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Human Resources		9 Employer (See Instructions) Allstate
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Staley, Stephanie <hr/> Contributor address; City; State; Zip Code Highland Village, TX 75077	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Human Resources		Employer (See Instructions) Allstate
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanley, Kathy <hr/> Contributor address; City; State; Zip Code Lorena, TX 76655	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanley, Kathy <hr/> Contributor address; City; State; Zip Code Lorena, TX 76655	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanton, Brandi <hr/> Contributor address; City; State; Zip Code Houston, TX 77079	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 590/692 Rpt: 593/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanton, Julie <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78628	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Pharmacist		9 Employer (See Instructions) Heb
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon <hr/> Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon <hr/> Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon <hr/> Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon <hr/> Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 591/692 Rpt: 594/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon <hr/> 6 Contributor address; City; State; Zip Code Frisco, TX 75035	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Starr, Janie <hr/> Contributor address; City; State; Zip Code Vashon, WA 98070	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Staub, Dale <hr/> Contributor address; City; State; Zip Code Litchfield, CT 06759	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stedman, Ken <hr/> Contributor address; City; State; Zip Code Austin, TX 78737	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steele, Margaret <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 592/692 Rpt: 595/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stein, John 6 Contributor address; City; State; Zip Code Mount Vernon, WA 98273	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steinfeld, Debbi Contributor address; City; State; Zip Code Prosper, TX 75078	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steitz, Sandy Contributor address; City; State; Zip Code Houston, TX 77008	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Compass
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steitz, Sandy Contributor address; City; State; Zip Code Houston, TX 77008	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Compass
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steitz, Sandy Contributor address; City; State; Zip Code Houston, TX 77008	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Compass

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 593/692 Rpt: 596/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephens, Louanne <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75287	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Actor		9 Employer (See Instructions) Mary Collins Agency
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephens, Louanne <hr/> Contributor address; City; State; Zip Code Dallas, TX 75287	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Actor		Employer (See Instructions) Mary Collins Agency
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephens, Louanne <hr/> Contributor address; City; State; Zip Code Dallas, TX 75287	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Actor		Employer (See Instructions) Mary Collins Agency
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sterling, Erin <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sterling, Susan <hr/> Contributor address; City; State; Zip Code Arlington, TX 76013	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sterling, Susan <hr/> 6 Contributor address; City; State; Zip Code Arlington, TX 76013	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sterling, Susan <hr/> Contributor address; City; State; Zip Code Arlington, TX 76013	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Christa <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Lobbyist		Employer (See Instructions) Autism Speaks
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Christa <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Lobbyist		Employer (See Instructions) Autism Speaks
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Christa <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Lobbyist		Employer (See Instructions) Autism Speaks

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 595/692 Rpt: 598/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Cynthia <hr/> 6 Contributor address; City; State; Zip Code Colleyville, TX 76034	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Cynthia <hr/> Contributor address; City; State; Zip Code Colleyville, TX 76034	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Cynthia <hr/> Contributor address; City; State; Zip Code Colleyville, TX 76034	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Gregory <hr/> Contributor address; City; State; Zip Code Blanco, TX 78606	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Sharon <hr/> Contributor address; City; State; Zip Code College Station, TX 77845	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Susan <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Austin Isd
Date 07/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart Stein, Christie <hr/> Contributor address; City; State; Zip Code Mount Vernon, WA 98273	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Farmer		Employer (See Instructions) Self-Employed
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart-Rodriguez, Wendi <hr/> Contributor address; City; State; Zip Code Houston, TX 77040	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Banker		Employer (See Instructions) Credit Union
Date 07/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stobart, Pamela <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stobart, Pamela <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stobart, Pamela <hr/> 6 Contributor address; City; State; Zip Code Kyle, TX 78640	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stokes, Kamilla <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Ut System
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stokes, Kamilla <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Ut System
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stokes, Kamilla <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Ut System
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stokes, Thomas B <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76107	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Acme Brick Company

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 598/692 Rpt: 601/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stokes Hilton, Lee <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78735	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stokes-Naumann, Janice <hr/> Contributor address; City; State; Zip Code Houston, TX 77077	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Dyslexia Therapist And Leader		Employer (See Instructions) Readmeastorytoday
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stokes-Naumann, Janice <hr/> Contributor address; City; State; Zip Code Houston, TX 77077	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Dyslexia Therapist And Leader		Employer (See Instructions) Readmeastorytoday
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stolz, Alissa <hr/> Contributor address; City; State; Zip Code Cypress, TX 77429	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, Nancy <hr/> Contributor address; City; State; Zip Code Frisco, TX 75036	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, Nancy <hr/> 6 Contributor address; City; State; Zip Code Frisco, TX 75036	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, Tracie <hr/> Contributor address; City; State; Zip Code Austin, TX 78753	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strange, Becky <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strange, Becky <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) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strawn, Russel <hr/> Contributor address; City; State; Zip Code Princeton, TX 75407	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 600/692 Rpt: 603/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strawn, Russel <hr/> 6 Contributor address; City; State; Zip Code Princeton, TX 75407	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strawn, Russel <hr/> Contributor address; City; State; Zip Code Princeton, TX 75407	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strickland, Jenelle <hr/> Contributor address; City; State; Zip Code Cypress, TX 77429	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strong, Michael <hr/> Contributor address; City; State; Zip Code Nacogdoches, TX 75964	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strong, Michael <hr/> Contributor address; City; State; Zip Code Nacogdoches, TX 75964	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 601/692 Rpt: 604/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strong, Michael <hr/> 6 Contributor address; City; State; Zip Code Nacogdoches, TX 75964	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strother, Julie <hr/> Contributor address; City; State; Zip Code Houston, TX 77095	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Dba		Employer (See Instructions) Diamond Offshore Drilling
Date 07/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Suggs, Jack <hr/> Contributor address; City; State; Zip Code Denison, TX 75020	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Suggs, Jack <hr/> Contributor address; City; State; Zip Code Denison, TX 75020	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Suggs, Jack <hr/> Contributor address; City; State; Zip Code Denison, TX 75020	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 602/692 Rpt: 605/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Suggs, Mary <hr/> 6 Contributor address; City; State; Zip Code Pantego, TX 76013	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Suggs, Mary <hr/> Contributor address; City; State; Zip Code Pantego, TX 76013	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) State Farm
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Ann <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Data Scientist		Employer (See Instructions) Heb
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Ann <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Data Scientist		Employer (See Instructions) Heb
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Ann <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Data Scientist		Employer (See Instructions) Heb

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Connie <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78731	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Summerlin, Mary Ellen <hr/> Contributor address; City; State; Zip Code Kerrville, TX 78028	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Summers, Heather <hr/> Contributor address; City; State; Zip Code Austin, TX 78732	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Google Trainer		Employer (See Instructions) Self-Employed
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Summers, Heather <hr/> Contributor address; City; State; Zip Code Austin, TX 78732	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Google Trainer		Employer (See Instructions) Self-Employed
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Summers, Heather <hr/> Contributor address; City; State; Zip Code Austin, TX 78732	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Google Trainer		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: 604/692 Rpt: 607/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sumrow, Patricia <hr/> 6 Contributor address; City; State; Zip Code Frisco, TX 75035	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Susanna, Rabinowitz <hr/> Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Lirom
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sutterfield, Karen <hr/> Contributor address; City; State; Zip Code Alpine, TX 79830	Amount of Contribution (\$) \$23.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sutton, Ann <hr/> Contributor address; City; State; Zip Code Houston, TX 77054	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Scientific Editor		Employer (See Instructions) Md Anderson Cancer Center
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sutton, Ann <hr/> Contributor address; City; State; Zip Code Houston, TX 77054	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Scientific Editor		Employer (See Instructions) Md Anderson Cancer Center

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 605/692 Rpt: 608/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sutton, Ann <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77054	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Scientific Editor		9 Employer (See Instructions) Md Anderson Cancer Center
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Svahn, Eric <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94710	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Carpenter		Employer (See Instructions) N/A
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swanson, Debra <hr/> Contributor address; City; State; Zip Code Mountain View, CA 94043	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Northrop Grumman
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swanson, Mary <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Swan Packaging
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swartzendruber, Cortney <hr/> Contributor address; City; State; Zip Code Austin, TX 78737	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 606/692 Rpt: 609/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swenson, Karen <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78723	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Self-Employed
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swenson, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self-Employed
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swenson, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self-Employed
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Symns, Sarah <hr/> Contributor address; City; State; Zip Code Dallas, TX 75206	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Symns, Sarah <hr/> Contributor address; City; State; Zip Code Dallas, TX 75206	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tabony, Laura <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78748	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taddiken, Mary <hr/> Contributor address; City; State; Zip Code Lucas, TX 75002	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taddiken, Mary <hr/> Contributor address; City; State; Zip Code Lucas, TX 75002	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taddiken, Mary <hr/> Contributor address; City; State; Zip Code Lucas, TX 75002	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Talan, Kenneth <hr/> Contributor address; City; State; Zip Code Hadley, MA 01035	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 608/692 Rpt: 611/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Talan, Kenneth <hr/> 6 Contributor address; City; State; Zip Code Hadley, MA 01035	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Talebi, Hani <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tallent, Bill Bob <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Woodland Advisors Llc
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tally, Mary Herr <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tansey, Cheryl <hr/> Contributor address; City; State; Zip Code Kingwood, TX 77339	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tapley, Martha <hr/> 6 Contributor address; City; State; Zip Code Tyler, TX 75704-7014	7 Amount of Contribution (\$) \$20.24
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tashima, Cindie <hr/> Contributor address; City; State; Zip Code San Anselmo, CA 94960	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Programmer		Employer (See Instructions) Ascrt Llc
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tate, Melanie <hr/> Contributor address; City; State; Zip Code Fw, TX 76133	Amount of Contribution (\$) \$97.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tawney, Jakob <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79423	Amount of Contribution (\$) \$96.55
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Janice M <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Janice M <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78759	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Janice M <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Larry <hr/> Contributor address; City; State; Zip Code Tyler, TX 75701	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Natalie <hr/> Contributor address; City; State; Zip Code Dallas, TX 75238	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Tiffani <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Veterinarian		Employer (See Instructions) Self-Employed

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Tiffani <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78757	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Veterinarian		9 Employer (See Instructions) Self-Employed
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Tiffani <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Veterinarian		Employer (See Instructions) Self-Employed
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor-Burton, Jennifer <hr/> Contributor address; City; State; Zip Code Austin, TX 78754	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor-Burton, Jennifer <hr/> Contributor address; City; State; Zip Code Austin, TX 78754	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Educational Diagnostician		Employer (See Instructions) Risd
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teitelman, A Carol <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teitelman, A Carol <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teitelman, A Carol <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Telles Jr., Ramon <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Telley, Deena <hr/> Contributor address; City; State; Zip Code Austin, TX 78752	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ten Eyck, Kevin <hr/> Contributor address; City; State; Zip Code Allen, TX 75002	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ten Eyck, Kevin <hr/> 6 Contributor address; City; State; Zip Code Allen, TX 75002	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ten Eyck, Kevin <hr/> Contributor address; City; State; Zip Code Allen, TX 75002	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tenneriello, Carol <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19119	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Lactation Consultantrn		Employer (See Instructions) Self-Employed
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tenneriello, Carol <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19119	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Lactation Consultantrn		Employer (See Instructions) Self-Employed
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tenneriello, Carol <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19119	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Lactation Consultantrn		Employer (See Instructions) Self-Employed

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tepfer, Randa <hr/> 6 Contributor address; City; State; Zip Code League City, TX 77573	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thaler, Glencora <hr/> Contributor address; City; State; Zip Code Houston, TX 77095	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Senior Execution Consultant		Employer (See Instructions) Wells Fargo Bank Na
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thaler, Glencora <hr/> Contributor address; City; State; Zip Code Houston, TX 77095	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Senior Execution Consultant		Employer (See Instructions) Wells Fargo Bank Na
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thatcher, Bri <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thatcher, Bri <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thayer, Anne <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78749	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Land Surveyor		9 Employer (See Instructions) Holt Carson Inc.
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thelen, Paulette C <hr/> Contributor address; City; State; Zip Code Tomball, TX 77377-6081	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Lead Logistics Specialist		Employer (See Instructions) Baker Hughes
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Theriot, Mary <hr/> Contributor address; City; State; Zip Code Blanco, TX 78606	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Debra <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, James <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, James <hr/> 6 Contributor address; City; State; Zip Code Cedar Park, TX 78613	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Kathy <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79102	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Gail <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Holly <hr/> Contributor address; City; State; Zip Code Seguin, TX 78155	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Seguin Isd
Date 07/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Nancy <hr/> Contributor address; City; State; Zip Code Austin, TX 78731-2107	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Ramona <hr/> 6 Contributor address; City; State; Zip Code Frisco, TX 75036	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Ramona <hr/> Contributor address; City; State; Zip Code Frisco, TX 75036	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Ramona <hr/> Contributor address; City; State; Zip Code Frisco, TX 75036	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Ramona <hr/> Contributor address; City; State; Zip Code Frisco, TX 75036	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Ramona <hr/> Contributor address; City; State; Zip Code Frisco, TX 75036	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 618/692 Rpt: 621/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomson, Sandra <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78233	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thrower, Kimberly C <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Administrative Assistant		Employer (See Instructions) Jlgg Family Lp
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tidmore, Candace <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78418	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tidmore, Candace <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78418	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tidmore, Candace <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78418	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 619/692 Rpt: 622/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tierman, Andrew 6 Contributor address; City; State; Zip Code Saginaw, MI 48603	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tillery, Jill Contributor address; City; State; Zip Code Plano, TX 75024-5438	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tingley, Dilla Contributor address; City; State; Zip Code Lincoln, MA 01773	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tom, Anne Contributor address; City; State; Zip Code Georgetown, TX 78626	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toto, Robert Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Physician		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: 620/692 Rpt: 623/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Townsend, Taylor <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76177	7 Amount of Contribution (\$) \$27.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Townsley, Shonda <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613-4323	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Townsley, Shonda <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613-4323	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Event Designer		Employer (See Instructions) Townsley Designs
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Traylor, Margaret <hr/> Contributor address; City; State; Zip Code Birmingham, AL 35223	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Legal Assistant		Employer (See Instructions) William P Traylor
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Treider, Jean <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) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 621/692 Rpt: 624/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trevino, Anna <hr/> 6 Contributor address; City; State; Zip Code Laredo, TX 78045	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trevino, Derek <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78411	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trexler, Alice <hr/> Contributor address; City; State; Zip Code Lexington, MA 02421	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trigo, Betty <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78413	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tritchler, Joan <hr/> Contributor address; City; State; Zip Code Austin, TX 78734	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 622/692 Rpt: 625/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tritchler, Joan <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78734	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tritchler, Joan <hr/> Contributor address; City; State; Zip Code Austin, TX 78734	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Troisi, Catherine <hr/> Contributor address; City; State; Zip Code Houston, TX 77005	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Troisi, Catherine <hr/> Contributor address; City; State; Zip Code Houston, TX 77005	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) University Of Texas School Of Public Health
Date 08/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Troisi, Catherine <hr/> Contributor address; City; State; Zip Code Houston, TX 77005	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Uthealth Houston

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 623/692 Rpt: 626/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Troisi, Catherine 6 Contributor address; City; State; Zip Code Houston, TX 77005	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) Uthealth Houston
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trout, Kelly Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$32.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tucker, Barbara Contributor address; City; State; Zip Code Arlington, TX 76010	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tucker, Barbara Contributor address; City; State; Zip Code Arlington, TX 76010	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tucker, Martha Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 624/692 Rpt: 627/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tucker, Martha <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78628	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tucker, Martha <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78628	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tucker, Sherry <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tucker, Sherry <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tung, Alan <hr/> Contributor address; City; State; Zip Code San Diego, CA 92101	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 625/692 Rpt: 628/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tung, Alan <hr/> 6 Contributor address; City; State; Zip Code San Diego, CA 92101	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 08/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tung, Alan <hr/> Contributor address; City; State; Zip Code San Diego, CA 92101	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tung, Alan <hr/> Contributor address; City; State; Zip Code San Diego, CA 92101	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tung, Alan <hr/> Contributor address; City; State; Zip Code San Diego, CA 92101	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tung, Alan <hr/> Contributor address; City; State; Zip Code San Diego, CA 92101	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 626/692 Rpt: 629/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turbenson, Kathleen <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75287	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turbenson, Kathleen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75287	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turbenson, Kathleen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75287	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turnbach, Ann <hr/> Contributor address; City; State; Zip Code Bellaire, TX 77401	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Gisele <hr/> Contributor address; City; State; Zip Code Plano, TX 75024	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 627/692 Rpt: 630/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turney, Rebecca <hr/> 6 Contributor address; City; State; Zip Code Plano, TX 75075	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Plano Isd
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tyson, Alexandra <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) N/A
Date 07/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ulmer, Tedra <hr/> Contributor address; City; State; Zip Code Brady, TX 76825	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ulmer, Tedra <hr/> Contributor address; City; State; Zip Code Brady, TX 76825	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ulmer, Tedra <hr/> Contributor address; City; State; Zip Code Brady, TX 76825	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 628/692 Rpt: 631/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ulmer, Tedra <hr/> 6 Contributor address; City; State; Zip Code Brady, TX 76825	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Upatham, Nick <hr/> Contributor address; City; State; Zip Code Dallas, TX 75240	Amount of Contribution (\$) \$72.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Upshaw, Caren <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Uribe, Esther <hr/> Contributor address; City; State; Zip Code Houston, TX 77096	Amount of Contribution (\$) \$48.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valentine, Alan <hr/> Contributor address; City; State; Zip Code Houston, TX 77030	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) University Of Texas Md Anderson Cancer Center

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 629/692 Rpt: 632/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valentine, Alan <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77030	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) University Of Texas Md Anderson Cancer Center
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valentine, Alan <hr/> Contributor address; City; State; Zip Code Houston, TX 77030	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) University Of Texas Md Anderson Cancer Center
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valentine, Alan <hr/> Contributor address; City; State; Zip Code Houston, TX 77030	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) University Of Texas Md Anderson Cancer Center
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valentine, Alan <hr/> Contributor address; City; State; Zip Code Houston, TX 77030	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) University Of Texas Md Anderson Cancer Center
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valentine, Alan <hr/> Contributor address; City; State; Zip Code Houston, TX 77030	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) University Of Texas Md Anderson Cancer Center

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 630/692 Rpt: 633/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valkner, Jacquelyn <hr/> 6 Contributor address; City; State; Zip Code Carmine, TX 78932	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Quality Lead		9 Employer (See Instructions) Telus International
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van De Vyver, Paul <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Cook Childrens Medical Center
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanhollebeke, Catherine <hr/> Contributor address; City; State; Zip Code Early, TX 76802	Amount of Contribution (\$) \$59.55
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanhollebeke, Catherine <hr/> Contributor address; City; State; Zip Code Early, TX 76802	Amount of Contribution (\$) \$108.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanhollebeke, Cs <hr/> Contributor address; City; State; Zip Code Early, TX 76802	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 631/692 Rpt: 634/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanhollebeke, Cs <hr/> 6 Contributor address; City; State; Zip Code Early, TX 76802	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanhollebeke, Cs <hr/> Contributor address; City; State; Zip Code Early, TX 76802	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanhollebeke, Cs <hr/> Contributor address; City; State; Zip Code Early, TX 76802	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanhollebeke, Cs <hr/> Contributor address; City; State; Zip Code Early, TX 76802	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanhollebeke, Cs <hr/> Contributor address; City; State; Zip Code Early, TX 76802	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 632/692 Rpt: 635/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanhollebeke, Cs <hr/> 6 Contributor address; City; State; Zip Code Early, TX 76802	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanhollebeke, Cs <hr/> Contributor address; City; State; Zip Code Early, TX 76802	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanhollebeke, Cs <hr/> Contributor address; City; State; Zip Code Early, TX 76802	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vargas, Christina <hr/> Contributor address; City; State; Zip Code El Paso, TX 79930	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Advisor		Employer (See Instructions) Texas Health & Human Services Commission
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vargas, Christina <hr/> Contributor address; City; State; Zip Code El Paso, TX 79930	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Advisor		Employer (See Instructions) Texas Health & Human Services Commission

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 633/692 Rpt: 636/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vargas, Christina <hr/> 6 Contributor address; City; State; Zip Code El Paso, TX 79930	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Advisor		9 Employer (See Instructions) Texas Health & Human Services Commission
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vasquez, Melba <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self-Employed
Date 08/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vasquez, Melba <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self-Employed
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vasquez, Melba <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self-Employed
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veitenheimer, Emma <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78201	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Human Resources		Employer (See Instructions) Usaa

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 634/692 Rpt: 637/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vera, Nancy <hr/> 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78415	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Corpus Christi Aft
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Verduzco, Lori <hr/> Contributor address; City; State; Zip Code Harlingen, TX 78552	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) School Counselor		Employer (See Instructions) Sbcisd
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Verduzco, Lori <hr/> Contributor address; City; State; Zip Code Harlingen, TX 78552	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) School Counselor		Employer (See Instructions) Sbcisd
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Verduzco, Lori <hr/> Contributor address; City; State; Zip Code Harlingen, TX 78552	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) School Counselor		Employer (See Instructions) Sbcisd
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vermoortel Cook, Annick <hr/> Contributor address; City; State; Zip Code Savannah, TX 76227	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 635/692 Rpt: 638/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Verner, Jimmy <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75211	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Jimmy L. Verner Jr. P.C.
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Verner, Jimmy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75211	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Jimmy L. Verner Jr. P.C.
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Verner, Jimmy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75211	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Jimmy L. Verner Jr. P.C.
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vernon, Frances <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76308	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vernon, Frances <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76308	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 636/692 Rpt: 639/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vernon, Frances <hr/> 6 Contributor address; City; State; Zip Code Wichita Falls, TX 76308	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vernon, Kim <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self-Employed
Date 07/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vernon, Kim <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self-Employed
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vernon, Kim <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self-Employed
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vernon, Kim <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self-Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 637/692 Rpt: 640/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vernon, Kim <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75230	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Self-Employed
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vernon, Kim <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self-Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vernon, Kim <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self-Employed
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vick, Melinda <hr/> Contributor address; City; State; Zip Code Waxahachie, TX 75165	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villarreal, Becky <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613-4034	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Acc

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 638/692 Rpt: 641/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villarreal, Becky <hr/> 6 Contributor address; City; State; Zip Code Cedar Park, TX 78613-4034	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Acc
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villarreal, Juanita <hr/> Contributor address; City; State; Zip Code Austin, TX 78750	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vincent, Brenda <hr/> Contributor address; City; State; Zip Code Spring, TX 77379	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Flight Attendant		Employer (See Instructions) United
Date 08/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vincent, Brenda <hr/> Contributor address; City; State; Zip Code Spring, TX 77379	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Flight Attendant		Employer (See Instructions) United
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vincent, Brenda <hr/> Contributor address; City; State; Zip Code Spring, TX 77379	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Flight Attendant		Employer (See Instructions) United

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 639/692 Rpt: 642/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vinson, Ed <hr/> 6 Contributor address; City; State; Zip Code Snyder, TX 79549	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Chemist		9 Employer (See Instructions) Chemplex Advanced Materials
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Visser, Rhonda <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Round Rock Tx Isd
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Visser, Rhonda <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Round Rock Tx Isd
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Visser, Rhonda <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Round Rock Tx Isd
Date 07/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vitrano, Sandra <hr/> Contributor address; City; State; Zip Code Houston, TX 77095	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Memorial Hermann Health System

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 640/692 Rpt: 643/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vogt, Tamara <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78723	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Voll, Alana <hr/> Contributor address; City; State; Zip Code Leander, TX 78641	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) W Mulley, Mary <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76903	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waggoner, Clinton <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waggoner, Clinton <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 641/692 Rpt: 644/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waggoner, Clinton <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78731	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagner, Lucy <hr/> Contributor address; City; State; Zip Code Houston, TX 77088	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagner, Nancy <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagner, Nancy <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagner, Nancy <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 642/692 Rpt: 645/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waite, Barbara <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78633-5466	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waite, Barbara <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633-5466	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waite, Barbara <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633-5466	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wakefield, Sharon <hr/> Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Artist
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Julie <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78232	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Paraprofessional		Employer (See Instructions) Ahisd

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 643/692 Rpt: 646/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walkowicz, Liz <hr/> 6 Contributor address; City; State; Zip Code Garland, TX 75043	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walla, Diana <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self-Employed
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walla, Diana <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self-Employed
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walla, Diana <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self-Employed
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waller, Barry <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 644/692 Rpt: 647/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walsh, Dee <hr/> 6 Contributor address; City; State; Zip Code Grapevine, TX 76051	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walsh, Dee <hr/> Contributor address; City; State; Zip Code Grapevine, TX 76051	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walsh, Dee <hr/> Contributor address; City; State; Zip Code Grapevine, TX 76051	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walthall, Karen <hr/> Contributor address; City; State; Zip Code Garland, TX 75043	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Targus		Employer (See Instructions) Geologist
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waltman Knight, Lelynne <hr/> Contributor address; City; State; Zip Code Mansfield, TX 76063	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 645/692 Rpt: 648/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waltman Knight, Lelynne <hr/> 6 Contributor address; City; State; Zip Code Mansfield, TX 76063	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waltman Knight, Lelynne <hr/> Contributor address; City; State; Zip Code Mansfield, TX 76063	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ward, Ana <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ward, Crystal <hr/> Contributor address; City; State; Zip Code Plano, TX 75023	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ward, Natalie <hr/> Contributor address; City; State; Zip Code Magnolia, TX 77354	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 646/692 Rpt: 649/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ward, Natalie <hr/> 6 Contributor address; City; State; Zip Code Magnolia, TX 77354	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wareing, Bess <hr/> Contributor address; City; State; Zip Code Houston, TX 77027	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self-Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wareing, Bess <hr/> Contributor address; City; State; Zip Code Houston, TX 77027	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Psychologist		Employer (See Instructions) Self-Employed
Date 07/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warner, William <hr/> Contributor address; City; State; Zip Code Belmont, MA 02478	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warner, William <hr/> Contributor address; City; State; Zip Code Belmont, MA 02478	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 647/692 Rpt: 650/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warner, William <hr/> 6 Contributor address; City; State; Zip Code Belmont, MA 02478	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warner, William <hr/> Contributor address; City; State; Zip Code Belmont, MA 02478	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warnken, Peter <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681-1699	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Senior Manager		Employer (See Instructions) Ercot Inc
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wasden, Kay <hr/> Contributor address; City; State; Zip Code Houston, TX 77096	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Musician		Employer (See Instructions) Self-Employed
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wasden, Kay <hr/> Contributor address; City; State; Zip Code Houston, TX 77096	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Musician		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: 648/692 Rpt: 651/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wasden, Kay <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77096	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Musician		9 Employer (See Instructions) Self-Employed
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wasden, Kay <hr/> Contributor address; City; State; Zip Code Houston, TX 77096	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Musician		Employer (See Instructions) Self-Employed
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wasden, Kay <hr/> Contributor address; City; State; Zip Code Houston, TX 77096	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Musician		Employer (See Instructions) Self-Employed
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wasden, Kay <hr/> Contributor address; City; State; Zip Code Houston, TX 77096	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Musician		Employer (See Instructions) Self-Employed
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wassmuth, Kimberly <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78664	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Its		Employer (See Instructions) Rrisd

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 649/692 Rpt: 652/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Corinne <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75223	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watts, Marie <hr/> Contributor address; City; State; Zip Code Muldoon, TX 78949	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waxler, Samantha <hr/> Contributor address; City; State; Zip Code Sealy, TX 77474	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waxler, Samantha <hr/> Contributor address; City; State; Zip Code Sealy, TX 77474	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waxler, Samantha <hr/> Contributor address; City; State; Zip Code Sealy, TX 77474	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 650/692 Rpt: 653/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weadon, Megan <hr/> 6 Contributor address; City; State; Zip Code Plano, TX 75023	7 Amount of Contribution (\$) \$8.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weatherford, Bruce <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Member Of Technical Staff		Employer (See Instructions) Amd
Date 07/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weatherly, Cindy <hr/> Contributor address; City; State; Zip Code Houston, TX 77056	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weatherly, Cindy <hr/> Contributor address; City; State; Zip Code Houston, TX 77056	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weatherly, Cindy <hr/> Contributor address; City; State; Zip Code Houston, TX 77056	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 651/692 Rpt: 654/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, Hillary <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78201	7 Amount of Contribution (\$) \$33.50
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weber, Charlotte Ann <hr/> Contributor address; City; State; Zip Code Heidenheimer, TX 76533	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weber, Charlotte Ann <hr/> Contributor address; City; State; Zip Code Heidenheimer, TX 76533	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weber, Charlotte Ann <hr/> Contributor address; City; State; Zip Code Heidenheimer, TX 76533	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webre, Bernadette <hr/> Contributor address; City; State; Zip Code Colleyville, TX 76034	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 652/692 Rpt: 655/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webre, Bernadette <hr/> 6 Contributor address; City; State; Zip Code Colleyville, TX 76034	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wedig, Lynette <hr/> Contributor address; City; State; Zip Code Kerrville, TX 78028	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weeks, Kristin <hr/> Contributor address; City; State; Zip Code Celina, TX 75009	Amount of Contribution (\$) \$15.50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weems, Mary <hr/> Contributor address; City; State; Zip Code Katy, TX 77493	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiss, Barbara <hr/> Contributor address; City; State; Zip Code The Villages, FL 32162	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 653/692 Rpt: 656/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weitz Michie, Sally <hr/> 6 Contributor address; City; State; Zip Code New Braunfels, TX 78130	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weitz-Michie, Sally <hr/> Contributor address; City; State; Zip Code New Braunfels, TX 78130	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Welch, Donald <hr/> Contributor address; City; State; Zip Code Houston, TX 77070	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Welcome, James <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wellborn, Deborah <hr/> Contributor address; City; State; Zip Code Center Point, TX 78010	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Ksh

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 654/692 Rpt: 657/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wellborn, Deborah <hr/> 6 Contributor address; City; State; Zip Code Center Point, TX 78010	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Nurse		9 Employer (See Instructions) Ksh
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wellborn, Deborah <hr/> Contributor address; City; State; Zip Code Center Point, TX 78010	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Ksh
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wellborn, Deborah <hr/> Contributor address; City; State; Zip Code Center Point, TX 78010	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Ksh
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wellborn, Deborah <hr/> Contributor address; City; State; Zip Code Center Point, TX 78010	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Ksh
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wellborn, Deborah <hr/> Contributor address; City; State; Zip Code Center Point, TX 78010	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Ksh

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 655/692 Rpt: 658/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weller, Elizabeth <hr/> 6 Contributor address; City; State; Zip Code Carrollton, TX 75006	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Lgbs
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wells, Jeanne <hr/> Contributor address; City; State; Zip Code Allen, TX 75002	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wells, Jeanne <hr/> Contributor address; City; State; Zip Code Allen, TX 75002	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wells, Jeanne <hr/> Contributor address; City; State; Zip Code Allen, TX 75002	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wendt, Amilee <hr/> Contributor address; City; State; Zip Code Houston, TX 77025	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Interior Design		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: 656/692 Rpt: 659/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wernz, Jackie <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75206	7 Amount of Contribution (\$) \$37.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wernz, Jackie <hr/> Contributor address; City; State; Zip Code Dallas, TX 75206	Amount of Contribution (\$) \$37.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Angela <hr/> Contributor address; City; State; Zip Code Austin, TX 78737	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Angela <hr/> Contributor address; City; State; Zip Code Austin, TX 78737	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Angela <hr/> Contributor address; City; State; Zip Code Austin, TX 78737	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 657/692 Rpt: 660/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Deborah <hr/> 6 Contributor address; City; State; Zip Code Sherman, TX 75092	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Deborah <hr/> Contributor address; City; State; Zip Code Sherman, TX 75092	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Deborah <hr/> Contributor address; City; State; Zip Code Sherman, TX 75092	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Sally <hr/> Contributor address; City; State; Zip Code Plano, TX 75075-3343	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West-Bray, Tamara <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Eanes Isd

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 658/692 Rpt: 661/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westerheide, Edie <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76133	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westover, Linda <hr/> Contributor address; City; State; Zip Code Blue Ridge, TX 75424	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westwood, Nancy <hr/> Contributor address; City; State; Zip Code Houston, TX 77345	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) P/T Research Assistant		Employer (See Instructions) Hml Irb
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whatley, Jennifer <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78233	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whatley, Jennifer <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78233	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 659/692 Rpt: 662/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whatley, Jennifer 6 Contributor address; City; State; Zip Code San Antonio, TX 78233	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheaton, M C Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheaton, M C Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheaton, M C Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheaton, M C Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 660/692 Rpt: 663/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheeler, Janifer <hr/> 6 Contributor address; City; State; Zip Code Round Rock, TX 78681	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheeler, Janifer <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheeler, Janifer <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheeler, Sandi <hr/> Contributor address; City; State; Zip Code Schertz, TX 78154	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheeler, Sandi <hr/> Contributor address; City; State; Zip Code Schertz, TX 78154	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 661/692 Rpt: 664/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheeler, Sandi <hr/> 6 Contributor address; City; State; Zip Code Schertz, TX 78154	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Betty H <hr/> Contributor address; City; State; Zip Code Houston, TX 77057	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Betty H <hr/> Contributor address; City; State; Zip Code Houston, TX 77057	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Betty H <hr/> Contributor address; City; State; Zip Code Houston, TX 77057	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Lowell <hr/> Contributor address; City; State; Zip Code College Station, TX 77840	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Writer/Editor		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: 662/692 Rpt: 665/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Lowell <hr/> 6 Contributor address; City; State; Zip Code College Station, TX 77840	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) Texas A&M University
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Mark <hr/> Contributor address; City; State; Zip Code North Richland Hills, TX 76180-8141	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Management		Employer (See Instructions) Vizient
Date 07/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Marta <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Marta <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Marta <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 663/692 Rpt: 666/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Michael <hr/> 6 Contributor address; City; State; Zip Code Wasilla, AK 99623	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitlow, Stuart <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Texas Legal Services Center
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitlow, Stuart <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Texas Legal Services Center
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitney, Deana <hr/> Contributor address; City; State; Zip Code Bedford, TX 76021	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whittemore, Donna <hr/> Contributor address; City; State; Zip Code Mico, TX 78056	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 664/692 Rpt: 667/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whittenberg, Mary <hr/> 6 Contributor address; City; State; Zip Code Arlington, TX 76012-2026	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Nisd
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Widoff, Mark <hr/> Contributor address; City; State; Zip Code Lewes, DE 19958	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Widoff, Mark <hr/> Contributor address; City; State; Zip Code Lewes, DE 19958	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Widoff, Mark <hr/> Contributor address; City; State; Zip Code Lewes, DE 19958	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Widoff, Mark <hr/> Contributor address; City; State; Zip Code Lewes, DE 19958	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 665/692 Rpt: 668/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiginton, Sunne <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78731	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiginton, Sunne <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiginton, Sunne <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilborn-Verdugo, Jennifer <hr/> Contributor address; City; State; Zip Code Katy, TX 77450	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self-Employed
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilbur, Cara <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) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 666/692 Rpt: 669/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilcox, Allison <hr/> 6 Contributor address; City; State; Zip Code Midland, MI 48640	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilder, Ashley <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilder, Laura <hr/> Contributor address; City; State; Zip Code Garland, TX 75043	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilder, Laura <hr/> Contributor address; City; State; Zip Code Garland, TX 75043	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilder, Laura <hr/> Contributor address; City; State; Zip Code Garland, TX 75043	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 667/692 Rpt: 670/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilder, Laura <hr/> 6 Contributor address; City; State; Zip Code Garland, TX 75043	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilder, Laura <hr/> Contributor address; City; State; Zip Code Garland, TX 75043	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilder, Laura <hr/> Contributor address; City; State; Zip Code Garland, TX 75043	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilder, Nicholas <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75071	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Fraud Control Manager		Employer (See Instructions) Toyota Financial Services
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilder, Nicholas <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75071	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Fraud Control Manager		Employer (See Instructions) Toyota Financial Services

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 668/692 Rpt: 671/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilder, Nicholas <hr/> 6 Contributor address; City; State; Zip Code Mckinney, TX 75071	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Fraud Control Manager		9 Employer (See Instructions) Toyota Financial Services
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilder, Nicholas <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75071	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Fraud Control Manager		Employer (See Instructions) Toyota Financial Services
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilder, Nicholas <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75071	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Fraud Control Manager		Employer (See Instructions) Toyota Financial Services
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilder, Nicholas <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75071	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Fraud Control Manager		Employer (See Instructions) Toyota Financial Services
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilemon, Gloria <hr/> Contributor address; City; State; Zip Code Dallas, TX 75232	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilemon, Gloria <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75232	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiley, Barbara <hr/> Contributor address; City; State; Zip Code Brenham, TX 77833	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilhite, Terri <hr/> Contributor address; City; State; Zip Code Valley View, TX 76272	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Finance And Administration Manager		Employer (See Instructions) Wilhite Land Surveying
Date 08/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilhite, Terri <hr/> Contributor address; City; State; Zip Code Valley View, TX 76272	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Finance And Administration Manager		Employer (See Instructions) Wilhite Land Surveying
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilhite, Terri <hr/> Contributor address; City; State; Zip Code Valley View, TX 76272	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Finance And Administration Manager		Employer (See Instructions) Wilhite Land Surveying

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkerson, Christina <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77009	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Self Employed		9 Employer (See Instructions) Game Night Kit
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkerson, Christina <hr/> Contributor address; City; State; Zip Code Houston, TX 77009	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Game Night Kit
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkerson, Christina <hr/> Contributor address; City; State; Zip Code Houston, TX 77009	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Game Night Kit
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkins, David <hr/> Contributor address; City; State; Zip Code Marfa, TX 79843-1555	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Chelsea <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76118	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Pet Care Provider		Employer (See Instructions) Camp Bedford Pet Resort

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Chloe <hr/> 6 Contributor address; City; State; Zip Code Arlington, TX 76011	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Sonographer		9 Employer (See Instructions) Stella Mattina
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Dawn <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78254	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Jennifer <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Paralegal		Employer (See Instructions) Virtus Real Estate Capital
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Jennifer <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78681	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Paralegal		Employer (See Instructions) Virtus Real Estate Capital
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Loren <hr/> Contributor address; City; State; Zip Code Austin, TX 78717	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 672/692 Rpt: 675/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Marcia <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78735	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Human Resources		9 Employer (See Instructions) Chuy'S Opco
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Nancy <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Stephen <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Stephen <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Cheryl <hr/> Contributor address; City; State; Zip Code Arlington, TX 76017-1651	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Josephine <hr/> 6 Contributor address; City; State; Zip Code Hye, TX 78635	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Josephine <hr/> Contributor address; City; State; Zip Code Hye, TX 78635	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Josephine <hr/> Contributor address; City; State; Zip Code Hye, TX 78635	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willison, Maydenis <hr/> Contributor address; City; State; Zip Code Dublin, TX 76446	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Angie <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Pflugerville Isd

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2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Angie <hr/> 6 Contributor address; City; State; Zip Code Cedar Park, TX 78613	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Pflugerville Isd
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Angie <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Pflugerville Isd
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Carol <hr/> Contributor address; City; State; Zip Code Sanger, TX 76266	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Customer Service		Employer (See Instructions) Verizon
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Claudia <hr/> Contributor address; City; State; Zip Code Arlington, TX 76011-2995	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Jan <hr/> Contributor address; City; State; Zip Code Cibolo, TX 78108	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 675/692 Rpt: 678/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Jan <hr/> 6 Contributor address; City; State; Zip Code Cibolo, TX 78108	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Jan <hr/> Contributor address; City; State; Zip Code Cibolo, TX 78108	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Kristine <hr/> Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$47.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Stephen <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Farmer		Employer (See Instructions) Self-Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Stephen <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Farmer		Employer (See Instructions) Self-Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 676/692 Rpt: 679/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilton, Jennifer <hr/> 6 Contributor address; City; State; Zip Code Little Elm, TX 75068	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Executive Assistant		9 Employer (See Instructions) Wealthcounsel
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wimberley, Kim <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Del Valle Isd
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wimberley, Kim <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Del Valle Isd
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wimberley, Kim <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Del Valle Isd
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wimberley, Kim <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Del Valle Isd

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 677/692 Rpt: 680/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winans, Janie <hr/> 6 Contributor address; City; State; Zip Code Campbell, TX 75422	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winemiller, Theresa <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winfield, Laurie <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winfield, Phil <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Creative Director		Employer (See Instructions) Liveramp
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winfield, Phil <hr/> Contributor address; City; State; Zip Code Austin, TX 78729	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Creative Director		Employer (See Instructions) Liveramp

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 678/692 Rpt: 681/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winfield, Phil <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78729	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Creative Director		9 Employer (See Instructions) Liveramp
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wingert, Linda <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wingert, Linda <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wingert, Linda <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wingis, Joseph <hr/> Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 679/692 Rpt: 682/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winter, Misty <hr/> 6 Contributor address; City; State; Zip Code The Woodlands, TX 77382	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Witt, Beverly <hr/> Contributor address; City; State; Zip Code Plano, TX 75093	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolf, Thalia <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolfe, Jill <hr/> Contributor address; City; State; Zip Code Houston, TX 77096	Amount of Contribution (\$) \$9.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolff, Sharon <hr/> Contributor address; City; State; Zip Code Euless, TX 76039	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 680/692 Rpt: 683/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolff, Sharon 6 Contributor address; City; State; Zip Code Euless, TX 76039	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolff, Sharon Contributor address; City; State; Zip Code Euless, TX 76039	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolpmann, Nicola Contributor address; City; State; Zip Code Pearland, TX 77581	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolpmann, Nicola Contributor address; City; State; Zip Code Pearland, TX 77581	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolpmann, Nicola Contributor address; City; State; Zip Code Pearland, TX 77581	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 681/692 Rpt: 684/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Womack, Stephen <hr/> 6 Contributor address; City; State; Zip Code Rowlett, TX 75089	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Letter Carrier		9 Employer (See Instructions) Usps
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Jamie <hr/> Contributor address; City; State; Zip Code Ransom Canyon, TX 79366	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Jen <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Judith <hr/> Contributor address; City; State; Zip Code Seattle, WA 98117	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodard-Entrekin, Jerrilyn <hr/> Contributor address; City; State; Zip Code Bedford, TX 76021	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Small Business Owner Teacher & Petsitter		Employer (See Instructions) Self-Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 682/692 Rpt: 685/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woodward-Frost, Diane <hr/> 6 Contributor address; City; State; Zip Code Tulsa, OK 74136	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Mineral Rights/Leasing		9 Employer (See Instructions) Self-Employed
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Worden, Debbie <hr/> Contributor address; City; State; Zip Code Leander, TX 78641	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Workman, Diane <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78250	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Alexis <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79106	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Cheryl <hr/> Contributor address; City; State; Zip Code Euless, TX 76040	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 683/692 Rpt: 686/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Deadra <hr/> 6 Contributor address; City; State; Zip Code New Braunfels, TX 78130	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Deadra <hr/> Contributor address; City; State; Zip Code New Braunfels, TX 78130	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Jacque <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78217	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Kelli <hr/> Contributor address; City; State; Zip Code Flower Mound, TX 75022	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Kelli <hr/> Contributor address; City; State; Zip Code Flower Mound, TX 75022	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 684/692 Rpt: 687/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Kelli <hr/> 6 Contributor address; City; State; Zip Code Flower Mound, TX 75022	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Kellye <hr/> Contributor address; City; State; Zip Code Houston, TX 77042	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Kellye <hr/> Contributor address; City; State; Zip Code Houston, TX 77042	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Liz <hr/> Contributor address; City; State; Zip Code Moraga, NY 94556	Amount of Contribution (\$) \$20.24
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Mandy <hr/> Contributor address; City; State; Zip Code Wimberley, TX 78676	Amount of Contribution (\$) \$108.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 685/692 Rpt: 688/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Traci <hr/> 6 Contributor address; City; State; Zip Code Weatherford, TX 76085	7 Amount of Contribution (\$) \$47.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wyland, Jeanette <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78216	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wyland, Jeanette <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78216	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wyllie, Pamela <hr/> Contributor address; City; State; Zip Code Converse, TX 78109	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wyllie, Pamela <hr/> Contributor address; City; State; Zip Code Converse, TX 78109	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 686/692 Rpt: 689/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wyllie, Pamela <hr/> 6 Contributor address; City; State; Zip Code Converse, TX 78109	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Y, Adelaida <hr/> Contributor address; City; State; Zip Code Houston, TX 77095-1645	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Executive Assistant		Employer (See Instructions) Exxonmobil
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yagjian, Marc <hr/> Contributor address; City; State; Zip Code Austin, TX 78730	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Venture Capital		Employer (See Instructions) Origin Partners
Date 07/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yancy, Max <hr/> Contributor address; City; State; Zip Code Austin, TX 78765	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Plum Creek Records & Tapes
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yancy, Max <hr/> Contributor address; City; State; Zip Code Austin, TX 78765	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Plum Creek Records & Tapes

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 687/692 Rpt: 690/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yancy, Max <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78765	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Plum Creek Records & Tapes
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yanta, Jennifer <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ybarra, Jill <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$115.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yeager, Robert <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77380	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Trainer		Employer (See Instructions) Intercom
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yeager, Robert <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77380	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Trainer		Employer (See Instructions) Intercom

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 688/692 Rpt: 691/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yeager, Robert <hr/> 6 Contributor address; City; State; Zip Code The Woodlands, TX 77380	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Trainer		9 Employer (See Instructions) Intercom
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yeoman Lomangino, Sarah <hr/> Contributor address; City; State; Zip Code Sanger, TX 76266-5322	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yerks, Merilyn <hr/> Contributor address; City; State; Zip Code Forney, TX 75126	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Sales Rep		Employer (See Instructions) Southern Glazers Wine & Spirits
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yoder, Joseph <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) DOD Social Worker		Employer (See Instructions) Caci
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Hailey <hr/> Contributor address; City; State; Zip Code West Lake Hills, TX 78746	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 689/692 Rpt: 692/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Kay <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78202	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) Ucsb
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Tamara <hr/> Contributor address; City; State; Zip Code Austin, TX 78723	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Program Coordinator		Employer (See Instructions) Tceq
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Younger, Sharon <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Younger, Sharon <hr/> Contributor address; City; State; Zip Code Clifton, TX 76634	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yusuf, Jessica <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Tech Writer		Employer (See Instructions) Jtd

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 690/692 Rpt: 693/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yusuf, Jessica <hr/> 6 Contributor address; City; State; Zip Code Pearland, TX 77584	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Technical Writer		9 Employer (See Instructions) Jtd
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yusuf, Jessica <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Technical Writer		Employer (See Instructions) Jtd
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yusuf, Jessica <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Technical Writer		Employer (See Instructions) Jtd
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yusuf, Jessica <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Self-Employed
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yusuf, Jessica <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Self-Employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 691/692 Rpt: 694/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zahedani, Dulce <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77096	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Accountant		9 Employer (See Instructions) Veritex Community Bank
Date 08/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zahedani, Dulce <hr/> Contributor address; City; State; Zip Code Houston, TX 77096	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Veritex Community Bank
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zahedani, Dulce <hr/> Contributor address; City; State; Zip Code Houston, TX 77096	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Veritex Community Bank
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zehr, Erin <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zehr, Erin <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Comms		Employer (See Instructions) Dell

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 692/692 Rpt: 695/792
2 FILER NAME Mothers Against Greg Abbott		3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zephier, Darin <hr/> 6 Contributor address; City; State; Zip Code San Angelo, TX 76904	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions) Heg
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zephier, Darin <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76904	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Heg
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zhu, Shelby <hr/> Contributor address; City; State; Zip Code Dallas, TX 75218	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zook, Nicole <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Actor		Employer (See Instructions) Nicole Zook

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: 1/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/15/2024	5 Payee name AT Advocacy	
6 Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 153 Langtree Campus Drive Mooresville, NC 28117	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Consulting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/05/2024	Payee name Aldrich, Chelsea	
Amount (\$) \$6,565.75 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1230 Texas Ave El Paso, TX 79901	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Ad Production
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/26/2024	Payee name Amalgamated Bank	
Amount (\$) \$72.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1825 K St NW Washington, DC 20006	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/29/2024	5 Payee name Amalgamated Bank	
6 Amount (\$) \$88.37 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1825 K St NW Washington, DC 20006	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/26/2024	Candidate/Officeholder name Office sought Office held	
Payee name Amalgamated Bank		
Amount (\$) \$72.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1825 K St NW Washington, DC 20006	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/03/2024	Candidate/Officeholder name Office sought Office held	
Payee name Amazon		
Amount (\$) \$148.85 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 10 Terry Ave N Seattle, WA 98109	
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 Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 3/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/09/2024	5 Payee name Amazon	
6 Amount (\$) \$200.93 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 10 Terry Ave N Seattle, WA 98109	
8 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 Office Supplies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/10/2024	Payee name Amazon	
Amount (\$) \$29.99 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 10 Terry Ave N Seattle, WA 98109	
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 Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/16/2024	Payee name Amazon	
Amount (\$) \$72.11 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 10 Terry Ave N Seattle, WA 98109	
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 Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/16/2024	5 Payee name Amazon	
6 Amount (\$) \$160.20 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 10 Terry Ave N Seattle, WA 98109	
8 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 Office Supplies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/17/2024	Payee name Amazon	
Amount (\$) \$60.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 10 Terry Ave N Seattle, WA 98109	
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 Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/05/2024	Payee name Boss Media	
Amount (\$) \$2,148.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13899 Biscayne Blvd North Miami Beach, FL 33181	
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 Software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/02/2024	5 Payee name Buffer	
6 Amount (\$) \$127.68 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2443 Fillmore St #380-7163 San Francisco, CA 94115	
8 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 Software
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/02/2024	Candidate/Officeholder name Office sought Office held	
Payee name Buffer		
Amount (\$) \$127.68 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2443 Fillmore St #380-7163 San Francisco, CA 94115	
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 Software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/09/2024	Candidate/Officeholder name Office sought Office held	
Payee name Buffer		
Amount (\$) \$9.86 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2443 Fillmore St #380-7163 San Francisco, CA 94115	
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 Software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 6/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/03/2024	5 Payee name Buffer	
6 Amount (\$) \$140.45 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2443 Fillmore St #380-7163 San Francisco, CA 94115	
8 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 Software
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/25/2024	Candidate/Officeholder name Office sought Office held	
Payee name Buffer		
Amount (\$) \$3.04 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2443 Fillmore St #380-7163 San Francisco, CA 94115	
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 Software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/06/2024	Candidate/Officeholder name Office sought Office held	
Payee name Cates Legal Group PLLC		
Amount (\$) \$750.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 105 W 8TH ST STE 2B Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Legal Services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Legal Services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 7/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/01/2024	5 Payee name Clemons, Jason	
6 Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 311 W Mistletoe Ave #1 San Antonio, TX 78212	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Ad Production
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/08/2024	Payee name Currie, Betsy	
Amount (\$) \$300.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3903 Purdue St Houston, TX 77005	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Ad Production
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/22/2024	Payee name Dallas Morning News	
Amount (\$) \$32.51 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1954 Commerce St Dallas, TX 75201	
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 Subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/20/2024	5 Payee name Dallas Morning News	
6 Amount (\$) \$18.72 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1954 Commerce St Dallas, TX 75201	
8 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 Subscription
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/20/2024	Candidate/Officeholder name Office sought Office held	
Payee name Dallas Morning News		
Amount (\$) \$18.72 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1954 Commerce St Dallas, TX 75201	
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 Subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/19/2024	Candidate/Officeholder name Office sought Office held	
Payee name Destino-Eusi Williams Stephens		
Amount (\$) \$125.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6708 72nd St Lubbock, TX 79424	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Ad Production
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 9/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/05/2024	5 Payee name Dreamhost	
6 Amount (\$) \$695.88 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 17 Associated Rd Brea, CA 92821	
8 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 Software
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/05/2024	Payee name Furlin, Alexander	
Amount (\$) \$350.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1220 N Sycamore Ave Los Angeles, CA 90038	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/02/2024	Payee name Garcia CPA PLLC, Robert	
Amount (\$) \$750.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4523 Echo Grove San Antonio, TX 78259	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting Services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/02/2024	5 Payee name Garcia CPA PLLC, Robert	
6 Amount (\$) \$750.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 4523 Echo Grove San Antonio, TX 78259	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting Services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/02/2024	Candidate/Officeholder name Office sought Office held	
Payee name Google		
Amount (\$) \$38.38 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043	
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 Software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/02/2024	Candidate/Officeholder name Office sought Office held	
Payee name Google		
Amount (\$) \$38.38 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043	
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 Software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 11/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/19/2024	5 Payee name Google	
6 Amount (\$) \$3.19 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/02/2024	Candidate/Officeholder name Office sought Office held	
Payee name Google		
Amount (\$) \$38.38 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043	
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 Software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/02/2024	Candidate/Officeholder name Office sought Office held	
Payee name Google		
Amount (\$) \$38.38 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043	
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 Software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/02/2024	Candidate/Officeholder name Office sought Office held	
Payee name Google		
Amount (\$) \$38.38 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043	
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 Software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 12/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/19/2024	5 Payee name Google	
6 Amount (\$) \$3.19 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/03/2024	Candidate/Officeholder name Office sought Office held	
Payee name Google		
Amount (\$) \$38.38 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043	
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 Software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/03/2024	Candidate/Officeholder name Office sought Office held	
Payee name Google		
Amount (\$) \$38.38 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043	
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 Software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/03/2024	Candidate/Officeholder name Office sought Office held	
Payee name Google		
Amount (\$) \$38.38 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043	
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 Software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 13/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/19/2024	5 Payee name Google	
6 Amount (\$) \$3.19 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/23/2024	Payee name Hampton Inn	
Amount (\$) \$192.50 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 710 Crawford St Houston, TX 77002	
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 Travel
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/07/2024	Payee name Harland Clarke	
Amount (\$) \$113.44 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 15955 La Cantera Parkway San Antonio, TX 78256	
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 Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/10/2024	5 Payee name Houston Chronicle	
6 Amount (\$) \$15.96 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 4747 Southwest Fwy Houston, TX 77027	
8 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 Subscription
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/07/2024	Candidate/Officeholder name Houston Chronicle	
Amount (\$) \$15.96 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4747 Southwest Fwy Houston, TX 77027	
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 Subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/04/2024	Candidate/Officeholder name Houston Chronicle	
Amount (\$) \$15.96 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4747 Southwest Fwy Houston, TX 77027	
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 Subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/04/2024	Candidate/Officeholder name Houston Chronicle	
Amount (\$) \$15.96 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4747 Southwest Fwy Houston, TX 77027	
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 Subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 15/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/02/2024	5 Payee name Intuit	
6 Amount (\$) \$63.96 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5601Headquarters Dr Plano, TX 75024	
8 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 Software
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/01/2024	Candidate/Officeholder name Office sought Office held	
Payee name Intuit		
Amount (\$) \$63.96 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5601Headquarters Dr Plano, TX 75024	
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 Software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/03/2024	Candidate/Officeholder name Office sought Office held	
Payee name Intuit		
Amount (\$) \$69.29 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 5601Headquarters Dr Plano, TX 75024	
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 Software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 16/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/10/2024	5 Payee name Katz Compliance	
6 Amount (\$) \$51.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 33079 Washington, DC 22033	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Compliance Services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/08/2024	Candidate/Officeholder name Office sought Office held	
Payee name Katz Compliance		
Amount (\$) \$1,575.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 33079 Washington, DC 22033	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Compliance Services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/04/2024	Candidate/Officeholder name Office sought Office held	
Payee name Katz Compliance		
Amount (\$) \$585.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 33079 Washington, DC 22033	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Compliance Services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 17/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/09/2024	5 Payee name Katz Compliance	
6 Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 33079 Washington, DC 22033	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Compliance Services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/09/2024	Candidate/Officeholder name Office sought Office held	
Payee name Katz Compliance		
Amount (\$) \$49.50 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 33079 Washington, DC 22033	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Compliance Services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/10/2024	Candidate/Officeholder name Office sought Office held	
Payee name Katz Compliance		
Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 33079 Washington, DC 20033	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Compliance Services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/10/2024	Candidate/Officeholder name Office sought Office held	
Payee name Katz Compliance		
Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 33079 Washington, DC 20033	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Compliance Services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 18/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/15/2024	5 Payee name Ladino	
6 Amount (\$) \$97.31 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 200 E Grayson St San Antonio, TX 78215	
8 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 Meals
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/01/2024	Payee name Lisandro, Omar	
Amount (\$) \$1,333.93 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3903 Purdue St Houston, TX 77005	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Ad Production
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/25/2024	Payee name Maratea, Brian	
Amount (\$) \$750.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 114 Townpark Dr #100 Kennesaw, GA 30144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Ad Production
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 19/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/23/2024	5 Payee name Mini Mart	
6 Amount (\$) \$34.46 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 10010 La Porte Fqy Houston, TX 77017	
8 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 Meals
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/29/2024	Payee name Mosaic Bookkeeping	
Amount (\$) \$1,200.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1645 Midland Rd Edgewater, MD 21037	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting Services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/23/2024	Payee name Murphy Express	
Amount (\$) \$41.94 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2725 Ridge Point Dr High Ridge, MO 63049	
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 Shipping
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 20/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/08/2024	5 Payee name NGP VAN	
6 Amount (\$) \$2,007.27 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1420 New York Ave NW #650 Washington, DC 20005	
8 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 Software
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/06/2024	Candidate/Officeholder name Office sought Office held	
Payee name NGP VAN		
Amount (\$) \$2,007.27 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1420 New York Ave NW #650 Washington, DC 20005	
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 Software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/05/2024	Candidate/Officeholder name Office sought Office held	
Payee name New York Times		
Amount (\$) \$4.26 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 620 Eighth Avenue New York, NY 10018	
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 Subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 21/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/01/2024	5 Payee name New York Times	
6 Amount (\$) \$26.60 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 620 Eighth Avenue New York, NY 10018	
8 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 Subscription
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/29/2024	Candidate/Officeholder name Office sought Office held	
Date 08/29/2024	Payee name New York Times	
Amount (\$) \$26.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 620 Eighth Avenue New York, NY 10018	
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 Subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/26/2024	Candidate/Officeholder name Office sought Office held	
Date 09/26/2024	Payee name New York Times	
Amount (\$) \$26.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 620 Eighth Avenue New York, NY 10018	
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 Subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 22/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/31/2024	5 Payee name Newlin, Julye	
6 Amount (\$) \$3,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 10510 Rippling Fields Dr Houston, TX 77064	
8 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 Production
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/11/2024	Candidate/Officeholder name Nixon, Heather	
Amount (\$) \$600.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought 1230 Texas Ave El Paso, TX 79901	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Ad Production
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/29/2024	Candidate/Officeholder name Office Depot	
Amount (\$) \$38.78 <input type="checkbox"/> Expenditure from corporate funds	Office sought 3443 Kirby Dr Houston, TX 77098	
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 Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 23/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/02/2024	5 Payee name Printful	
6 Amount (\$) \$13.57 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/03/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$33.84 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/09/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$15.34 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 24/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/09/2024	5 Payee name Printful	
6 Amount (\$) \$29.44 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/11/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$47.62 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/17/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$25.28 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 25/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/17/2024	5 Payee name Printful	
6 Amount (\$) \$19.63 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/18/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$16.23 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/18/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$16.23 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/18/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$16.23 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 26/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/22/2024	5 Payee name Printful	
6 Amount (\$) \$21.05 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/24/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$16.23 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/26/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$38.83 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 27/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/26/2024	5 Payee name Printful	
6 Amount (\$) \$13.83 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/29/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$18.12 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/29/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$21.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/29/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$21.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 28/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/29/2024	5 Payee name Printful	
6 Amount (\$) \$14.14 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/29/2024	Payee name Printful	
Amount (\$) \$16.23 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/29/2024	Payee name Printful	
Amount (\$) \$14.34 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 29/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/30/2024	5 Payee name Printful	
6 Amount (\$) \$21.05 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/31/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$16.23 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/31/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$21.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/31/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$21.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 30/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/31/2024	5 Payee name Printful	
6 Amount (\$) \$15.96 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/31/2024	Candidate/Officeholder name Office sought Office held	
Date 07/31/2024	Payee name Printful	
Amount (\$) \$15.96 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/31/2024	Candidate/Officeholder name Office sought Office held	
Date 07/31/2024	Payee name Printful	
Amount (\$) \$15.96 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/31/2024	Candidate/Officeholder name Office sought Office held	
Date 07/31/2024	Payee name Printful	
Amount (\$) \$15.96 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 31/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/31/2024	5 Payee name Printful	
6 Amount (\$) \$29.76 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/02/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$46.43 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/02/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$51.79 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/02/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$51.79 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 32/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/05/2024	5 Payee name Printful	
6 Amount (\$) \$21.05 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
9 Complete ONLY if direct expenditure to benefit C/OH		
Date 08/05/2024	Candidate/Officeholder name	Office sought
Amount (\$) \$30.56 <input type="checkbox"/> Expenditure from corporate funds	Office held	
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 Printing
Complete ONLY if direct expenditure to benefit C/OH		
Date 08/06/2024	Candidate/Officeholder name	Office sought
Amount (\$) \$19.69 <input type="checkbox"/> Expenditure from corporate funds	Office held	
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 Printing
Complete ONLY if direct expenditure to benefit C/OH		

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: 33/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/06/2024	5 Payee name Printful	
6 Amount (\$) \$16.23 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/07/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$27.21 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/08/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$41.53 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 34/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/09/2024	5 Payee name Printful	
6 Amount (\$) \$13.63 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/12/2024	Payee name Printful	
Amount (\$) \$16.23 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/12/2024	Payee name Printful	
Amount (\$) \$17.91 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 35/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/12/2024	5 Payee name Printful	
6 Amount (\$) \$60.33 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/12/2024	Payee name Printful	
Amount (\$) \$14.34 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/13/2024	Payee name Printful	
Amount (\$) \$18.18 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 36/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/14/2024	5 Payee name Printful	
6 Amount (\$) \$19.69 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/14/2024	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$14.24 <input type="checkbox"/> Expenditure from corporate funds	Payee name Printful Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/15/2024	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$16.23 <input type="checkbox"/> Expenditure from corporate funds	Payee name Printful Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 37/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/16/2024	5 Payee name Printful	
6 Amount (\$) \$17.80 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/16/2024	Candidate/Officeholder name	Office sought
Payee name Printful	Office held	
Amount (\$) \$17.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/19/2024	Candidate/Officeholder name	Office sought
Payee name Printful	Office held	
Amount (\$) \$35.75 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 38/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/19/2024	5 Payee name Printful	
6 Amount (\$) \$17.80 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/20/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$16.60 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/20/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$21.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 39/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/21/2024	5 Payee name Printful	
6 Amount (\$) \$29.44 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/21/2024	Candidate/Officeholder name	Office sought
Payee name Printful	Office held	
Amount (\$) \$18.34 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/21/2024	Candidate/Officeholder name	Office sought
Payee name Printful	Office held	
Amount (\$) \$16.23 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/21/2024	Candidate/Officeholder name	Office sought
Payee name Printful	Office held	
Amount (\$) \$16.23 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 40/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/21/2024	5 Payee name Printful	
6 Amount (\$) \$19.76 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/23/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$14.34 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/23/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$19.69 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/23/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$19.69 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 41/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/23/2024	5 Payee name Printful	
6 Amount (\$) \$17.80 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/28/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$17.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/28/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$14.34 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/28/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$14.34 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 42/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/28/2024	5 Payee name Printful	
6 Amount (\$) \$17.80 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/30/2024	Payee name Printful	
Amount (\$) \$17.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/03/2024	Payee name Printful	
Amount (\$) \$21.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 43/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/03/2024	5 Payee name Printful	
6 Amount (\$) \$41.40 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/03/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$17.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/03/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$16.23 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/03/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$16.23 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 44/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/03/2024	5 Payee name Printful	
6 Amount (\$) \$16.23 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/03/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$17.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/03/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$17.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/03/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$17.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 45/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/09/2024	5 Payee name Printful	
6 Amount (\$) \$18.74 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/09/2024	Payee name Printful	
Amount (\$) \$32.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/09/2024	Payee name Printful	
Amount (\$) \$13.81 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 46/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/09/2024	5 Payee name Printful	
6 Amount (\$) \$18.12 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/10/2024	Payee name Printful	
Amount (\$) \$16.23 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/10/2024	Payee name Printful	
Amount (\$) \$16.23 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 47/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/11/2024	5 Payee name Printful	
6 Amount (\$) \$17.80 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/12/2024	Payee name Printful	
Amount (\$) \$34.58 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/16/2024	Payee name Printful	
Amount (\$) \$29.76 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
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: 48/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/16/2024	5 Payee name Printful	
6 Amount (\$) \$25.32 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/18/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$43.29 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/23/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$16.23 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 49/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/24/2024	5 Payee name Printful	
6 Amount (\$) \$14.34 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/27/2024	Payee name Printful	
Amount (\$) \$14.34 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/27/2024	Payee name Printful	
Amount (\$) \$35.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 50/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/30/2024	5 Payee name Printful	
6 Amount (\$) \$31.33 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/30/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$16.23 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/30/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$17.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/30/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printful		
Amount (\$) \$17.80 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11025 Westlake D Charlotte, NC 28273	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 51/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/03/2024	5 Payee name Printplace	
6 Amount (\$) \$678.73 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 8000 Haskell Ave Van Nuys, CA 91406	
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 Printing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/03/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printplace		
Amount (\$) \$786.54 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 8000 Haskell Ave Van Nuys, CA 91406	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/03/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printplace		
Amount (\$) \$540.38 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 8000 Haskell Ave Van Nuys, CA 91406	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/03/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printplace		
Amount (\$) \$540.38 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 8000 Haskell Ave Van Nuys, CA 91406	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 52/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/03/2024	5 Payee name Printplace	
6 Amount (\$) \$1,746.48 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 8000 Haskell Ave Van Nuys, CA 91406	
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 Printing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/13/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printplace		
Amount (\$) \$450.28 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 8000 Haskell Ave Van Nuys, CA 91406	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/24/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printplace		
Amount (\$) \$257.14 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 8000 Haskell Ave Van Nuys, CA 91406	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 53/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/02/2024	5 Payee name Provencio, Vanessa	
6 Amount (\$) \$300.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 6708 72nd St Lubbock, TX 79424	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Ad Production
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/30/2024	Payee name QR-Code-Generator	
Amount (\$) \$207.23 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 601 W 26th St Rm 357 New York, NY 10001	
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 Software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/16/2024	Payee name Rev.com	
Amount (\$) \$2.29 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1717 W 6th St, Ste 310 Austin, TX 78703	
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 Software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 54/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/11/2024	5 Payee name Route	
6 Amount (\$) \$3.10 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1557 W Innovation Way, STE 200 Lehi, UT 84043	
8 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 Shipping and Postage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/18/2024	Candidate/Officeholder name Office sought Office held	
Payee name Route		
Amount (\$) \$1.55 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1557 W Innovation Way, STE 200 Lehi, UT 84043	
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 Shipping and Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/01/2024	Candidate/Officeholder name Office sought Office held	
Payee name Route		
Amount (\$) \$1.55 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1557 W Innovation Way, STE 200 Lehi, UT 84043	
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 Shipping and Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 55/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/12/2024	5 Payee name Route	
6 Amount (\$) \$4.65 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1557 W Innovation Way, STE 200 Lehi, UT 84043	
8 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 Shipping and Postage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/22/2024	Candidate/Officeholder name Office sought Office held	
Payee name Route		
Amount (\$) \$3.10 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1557 W Innovation Way, STE 200 Lehi, UT 84043	
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 Shipping and Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/12/2024	Candidate/Officeholder name Office sought Office held	
Payee name Route		
Amount (\$) \$1.55 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1557 W Innovation Way, STE 200 Lehi, UT 84043	
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 Shipping and Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 56/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/19/2024	5 Payee name Route	
6 Amount (\$) \$1.55 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1557 W Innovation Way, STE 200 Lehi, UT 84043	
8 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 Shipping and Postage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/05/2024	Payee name Scale to Win	
Amount (\$) \$517.36 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 13742 Harper Street Santa Ana, CA 92703	
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 Software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/15/2024	Payee name Shipstation	
Amount (\$) \$31.97 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4301 Bull Creek Road Austin, TX 78731	
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 Shipping and Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 57/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/14/2024	5 Payee name Shipstation	
6 Amount (\$) \$31.97 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 4301 Bull Creek Road Austin, TX 78731	
8 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 Shipping and Postage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/16/2024	Candidate/Officeholder name Office sought Office held	
Payee name Shipstation		
Amount (\$) \$31.97 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4301 Bull Creek Road Austin, TX 78731	
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 Shipping and Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/28/2024	Candidate/Officeholder name Office sought Office held	
Payee name Speechify		
Amount (\$) \$375.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7901 4th Street N, Suite 6193 St. Petersburg, FL 33702	
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 Software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 58/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/09/2024	5 Payee name Stamps.com	
6 Amount (\$) \$56.25 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 990 E Grand Ave El Segundo, CA 90245	
8 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 Shipping
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/19/2024	Payee name Stamps.com	
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 990 E Grand Ave El Segundo, CA 90245	
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 Shipping
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/22/2024	Payee name Stamps.com	
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 990 E Grand Ave El Segundo, CA 90245	
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 Shipping
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 59/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/27/2024	5 Payee name Stamps.com	
6 Amount (\$) \$12.34 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 990 E Grand Ave El Segundo, CA 90245	
8 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 Shipping
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/27/2024	Candidate/Officeholder name Office sought Office held	
Payee name Stamps.com		
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 990 E Grand Ave El Segundo, CA 90245	
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 Shipping
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/29/2024	Candidate/Officeholder name Office sought Office held	
Payee name Stamps.com		
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 990 E Grand Ave El Segundo, CA 90245	
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 Shipping
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 60/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/29/2024	5 Payee name Stamps.com	
6 Amount (\$) \$10.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 990 E Grand Ave El Segundo, CA 90245	
8 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 Shipping
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/03/2024	Candidate/Officeholder name Office sought Office held	
Payee name Stamps.com		
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 990 E Grand Ave El Segundo, CA 90245	
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 Shipping
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/10/2024	Candidate/Officeholder name Office sought Office held	
Payee name Stamps.com		
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 990 E Grand Ave El Segundo, CA 90245	
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 Shipping
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 61/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/10/2024	5 Payee name Stamps.com	
6 Amount (\$) \$45.27 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 990 E Grand Ave El Segundo, CA 90245	
8 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 Shipping
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/10/2024	Candidate/Officeholder name Office sought Office held	
Payee name Stamps.com		
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 990 E Grand Ave El Segundo, CA 90245	
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 Shipping
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/23/2024	Candidate/Officeholder name Office sought Office held	
Payee name Stamps.com		
Amount (\$) \$22.77 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 990 E Grand Ave El Segundo, CA 90245	
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 Shipping
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 62/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/23/2024	5 Payee name Stamps.com	
6 Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 990 E Grand Ave El Segundo, CA 90245	
8 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 Shipping
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/27/2024	Payee name Stamps.com	
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 990 E Grand Ave El Segundo, CA 90245	
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 Shipping
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/05/2024	Payee name Super Cheap Signs	
Amount (\$) \$838.01 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 9200 Waterford Centre Blvd #100 Austin, TX 78758	
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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 63/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/15/2024	5 Payee name Texaco	
6 Amount (\$) \$37.86 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 6275 Airline Dr Houston, TX 77089	
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 Travel
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/18/2024	Payee name The Monitor	
Amount (\$) \$9.99 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1400 E Nolana Ave McAllen, TX 78504	
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 Subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/22/2024	Payee name The Monitor	
Amount (\$) \$9.99 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1400 E Nolana Ave McAllen, TX 78504	
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 Subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 64/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/19/2024	5 Payee name The Monitor	
6 Amount (\$) \$9.99 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1400 E Nolana Ave McAllen, TX 78504	
8 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 Subscription
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/08/2024	Payee name Thompson, Curtis	
Amount (\$) \$800.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 114 Townpark Dr #100 Kennesaw, GA 30144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/07/2024	Payee name Thompson, Luci	
Amount (\$) \$1,440.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6708 72nd St Lubbock, TX 79424	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Staff Time
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 65/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/03/2024	5 Payee name Triptych Strategies	
6 Amount (\$) \$8,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 11095 Viking Dr Ste 204 Eden Prairie, MN 55344	
8 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 Software Subscription
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/17/2024	Candidate/Officeholder name Office sought Office held	
Payee name Triptych Strategies		
Amount (\$) \$291.66 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11095 Viking Dr Ste 204 Eden Prairie, MN 55344	
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 Software Subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/29/2024	Candidate/Officeholder name Office sought Office held	
Payee name Triptych Strategies		
Amount (\$) \$8,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11095 Viking Dr Ste 204 Eden Prairie, MN 55344	
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 Software Subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 66/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/01/2024	5 Payee name Triptych Strategies	
6 Amount (\$) \$8,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 11095 Viking Dr Ste 204 Eden Prairie, MN 55344	
8 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 Software Subscription
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/09/2024	Payee name USPS	
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/11/2024	Payee name USPS	
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
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: 67/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/24/2024	5 Payee name USPS	
6 Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
8 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 Postage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/26/2024	Payee name USPS	
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/26/2024	Payee name USPS	
Amount (\$) \$15.36 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 68/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/29/2024	5 Payee name USPS	
6 Amount (\$) \$40.82 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
8 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 Postage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/29/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/29/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/29/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 69/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/29/2024	5 Payee name USPS	
6 Amount (\$) \$101.30 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
8 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 Postage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/29/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/29/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$18.32 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/29/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$18.32 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 70/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 07/29/2024	5 Payee name USPS	
6 Amount (\$) \$100.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
8 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 Postage
9 Complete ONLY if direct expenditure to benefit C/OH		
Date 08/01/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete ONLY if direct expenditure to benefit C/OH		
Date 08/05/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete ONLY if direct expenditure to benefit C/OH		

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: 71/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/06/2024	5 Payee name USPS	
6 Amount (\$) \$15.97 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
8 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 Postage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/06/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/08/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/08/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 72/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/09/2024	5 Payee name USPS	
6 Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
8 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 Postage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/12/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/14/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 73/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/19/2024	5 Payee name USPS	
6 Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
8 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 Postage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/20/2024	Candidate/Officeholder name Office sought Office held	
Date 08/20/2024	Payee name USPS	
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/20/2024	Candidate/Officeholder name Office sought Office held	
Date 08/20/2024	Payee name USPS	
Amount (\$) \$10.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate/Officeholder name Office sought Office held		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 74/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/20/2024	5 Payee name USPS	
6 Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
8 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 Postage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/26/2024	Payee name USPS	
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/26/2024	Payee name USPS	
Amount (\$) \$30.85 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 75/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/26/2024	5 Payee name USPS	
6 Amount (\$) \$53.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
8 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 Postage
9 Complete ONLY if direct expenditure to benefit C/OH		
Date 08/26/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete ONLY if direct expenditure to benefit C/OH		
Date 09/03/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete ONLY if direct expenditure to benefit C/OH		

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: 76/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/03/2024	5 Payee name USPS	
6 Amount (\$) \$11.15 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
8 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 Postage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/03/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$10.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/03/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/03/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 77/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/04/2024	5 Payee name USPS	
6 Amount (\$) \$16.30 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
8 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 Postage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/04/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/04/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/04/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 78/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/09/2024	5 Payee name USPS	
6 Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
8 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 Postage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/09/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/09/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/09/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 79/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/10/2024	5 Payee name USPS	
6 Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
8 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 Postage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/10/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$23.26 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/10/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$562.55 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/10/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$562.55 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 80/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/10/2024	5 Payee name USPS	
6 Amount (\$) \$562.55 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
8 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 Postage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/10/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$842.55 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/10/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$1,122.55 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/10/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$1,122.55 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 81/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/12/2024	5 Payee name USPS	
6 Amount (\$) \$15.77 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
8 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 Postage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/12/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/12/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/12/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 82/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/12/2024	5 Payee name USPS	
6 Amount (\$) \$10.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
8 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 Postage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/12/2024	Candidate/Officeholder name Office sought Office held	
Date 09/12/2024	Payee name USPS	
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/13/2024	Candidate/Officeholder name Office sought Office held	
Date 09/13/2024	Payee name USPS	
Amount (\$) \$10.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 83/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/13/2024	5 Payee name USPS	
6 Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
8 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 Postage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/16/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$45.53 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/16/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/16/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 84/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/17/2024	5 Payee name USPS	
6 Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
8 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 Postage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/17/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/18/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$52.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 85/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/18/2024	5 Payee name USPS	
6 Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
8 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 Postage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/18/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/18/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$10.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/18/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$10.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 86/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/19/2024	5 Payee name USPS	
6 Amount (\$) \$672.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
8 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 Postage
9 Complete ONLY if direct expenditure to benefit C/OH		
Date 09/23/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete ONLY if direct expenditure to benefit C/OH		
Date 09/24/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$52.50 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete ONLY if direct expenditure to benefit C/OH		

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: 87/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/24/2024	5 Payee name USPS	
6 Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
8 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 Postage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/24/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$31.51 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/24/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/24/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 88/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/24/2024	5 Payee name USPS	
6 Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
8 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 Postage
9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held		
Date 09/24/2024	Payee name USPS	
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held		
Date 09/24/2024	Payee name USPS	
Amount (\$) \$562.55 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
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: 89/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/24/2024	5 Payee name USPS	
6 Amount (\$) \$1,122.55 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
8 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 Postage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/24/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$1,458.55 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/25/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$131.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 90/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/25/2024	5 Payee name USPS	
6 Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
8 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 Postage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/25/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$10.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/25/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$1,118.55 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/25/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$1,118.55 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 91/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/26/2024	5 Payee name USPS	
6 Amount (\$) \$60.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
8 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 Postage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/26/2024	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$744.55 <input type="checkbox"/> Expenditure from corporate funds	Payee name USPS Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/26/2024	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$2,792.55 <input type="checkbox"/> Expenditure from corporate funds	Payee name USPS Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 92/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/27/2024	5 Payee name USPS	
6 Amount (\$) \$22.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
8 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 Postage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/27/2024	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$3.59 <input type="checkbox"/> Expenditure from corporate funds	Payee name USPS Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/27/2024	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$584.00 <input type="checkbox"/> Expenditure from corporate funds	Payee name USPS Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 93/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/27/2024	5 Payee name USPS	
6 Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
8 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 Postage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/27/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/27/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$122.55 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/27/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$122.55 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 94/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/27/2024	5 Payee name USPS	
6 Amount (\$) \$279.95 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
8 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 Postage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/30/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/30/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$133.95 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/30/2024	Candidate/Officeholder name Office sought Office held	
Payee name USPS		
Amount (\$) \$133.95 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 95/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/30/2024	5 Payee name USPS	
6 Amount (\$) \$27.85 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
8 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 Postage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/30/2024	Payee name USPS	
Amount (\$) \$1,397.55 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260	
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 Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/19/2024	Payee name WatchParty	
Amount (\$) \$5.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 17235 NW Corridor Ct Beaverton, OR 97006	
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 Software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 96/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 09/19/2024	5 Payee name WatchParty	
6 Amount (\$) \$5.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 17235 NW Corridor Ct Beaverton, OR 97006	
8 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 Software
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/05/2024	Candidate/Officeholder name Office sought Office held	
Payee name Zoom		
Amount (\$) \$17.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 55 Almaden Blvd, Suite 600 San Jose, CA 95113	
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 Software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/05/2024	Candidate/Officeholder name Office sought Office held	
Payee name Zoom		
Amount (\$) \$17.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 55 Almaden Blvd, Suite 600 San Jose, CA 95113	
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 Software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 97/97 Rpt:	2 FILER NAME Mothers Against Greg Abbott	3 Filer ID (Ethics Commission Filers) 00086561
4 Date 08/14/2024	5 Payee name Zoom	
6 Amount (\$) \$36.10 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 55 Almaden Blvd, Suite 600 San Jose, CA 95113	
8 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 Software
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/04/2024	Candidate/Officeholder name Zoom	Office sought Office held
Amount (\$) \$70.35 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 55 Almaden Blvd, Suite 600 San Jose, CA 95113	
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 Software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate/Officeholder name Office sought Office held		