

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) 00018807	2 Total pages filed: 29
3 COMMITTEE NAME State COPE Fund		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 10/28/2024	
		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 P. O. Box 12727 Austin, TX 78711		
	5 CAMPAIGN TREASURER NAME MS / MRS / MR FIRST MI Mr. Rick NICKNAME LAST SUFFIX Levy		
6 CAMPAIGN TREASURER STREET ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1106 Lavaca Suite 200 Austin, TX 78701		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 477-6195		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input checked="" 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 Month Day Year 09/27/2024 THROUGH 10/26/2024		
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	

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME State COPE Fund	13 Filer ID (Ethics Commission Filers) 00018807
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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 Jonathan Gracia State Representative
		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)	\$ 3,196.79
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 2,026.51
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 17,706.61
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.

Mr. Rick Levy

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

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
ADDENDUM

Page 3 of 29

12 COMMITTEE NAME State COPE Fund		13 Filer ID (Ethics Commission Filers) 00018807
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 Mariana Casarez State Representative 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.)	
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 Doug Peterson State Representative 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.)	
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 Brett Robinson State Representative 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.)	

SUBTOTALS - GPAC

17 COMMITTEE NAME State COPE Fund		18 Filer ID 00018807	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	2,831.11
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 checked="" type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$	365.68
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	\$	2,026.51
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: 1/22 Rpt: 5/29
2 FILER NAME State COPE Fund		3 Filer ID (Ethics Commission Filers) 00018807
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aguilar, Leonard <hr/> 6 Contributor address; City; State; Zip Code San Marcos, TX 78666	7 Amount of Contribution (\$) \$27.78
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Claretta <hr/> Contributor address; City; State; Zip Code Tyler, TX 75702	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amps, Emily <hr/> Contributor address; City; State; Zip Code Buda, TX 78610	Amount of Contribution (\$) \$27.78
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Jackie <hr/> Contributor address; City; State; Zip Code Houston, TX 77078	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barreto, Fabiola <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/22 Rpt: 6/29
2 FILER NAME State COPE Fund		3 Filer ID (Ethics Commission Filers) 00018807
4 Date 10/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berryman, Trey <hr/> 6 Contributor address; City; State; Zip Code Kirbyville, TX 75956	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradshaw, James <hr/> Contributor address; City; State; Zip Code Justin, TX 76247	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brisker, Calvin <hr/> Contributor address; City; State; Zip Code Houston, TX 77093	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant, Judy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75231	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cash, Bob <hr/> Contributor address; City; State; Zip Code Austin, TX 78754-5738	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/22 Rpt: 7/29
2 FILER NAME State COPE Fund		3 Filer ID (Ethics Commission Filers) 00018807
4 Date 10/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cole, Philip 6 Contributor address; City; State; Zip Code Port Neches, TX 77651	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crandell, Mark Contributor address; City; State; Zip Code League City, TX 77573	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cummins, Thomas Contributor address; City; State; Zip Code San Antonio, TX 78249	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, Michael Contributor address; City; State; Zip Code Huntsville, TX 77320	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cutburth, William Contributor address; City; State; Zip Code Fort Worth, TX 76244	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/22 Rpt: 8/29
2 FILER NAME State COPE Fund		3 Filer ID (Ethics Commission Filers) 00018807
4 Date 10/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Del Rio, Alicia <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78749	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dewey, Andy <hr/> Contributor address; City; State; Zip Code Houston, TX 77071	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drumgo, Brian <hr/> Contributor address; City; State; Zip Code Houston, TX 77067	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunlap, Traci <hr/> Contributor address; City; State; Zip Code Austin, TX 78744	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edge, Don <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78260	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/22 Rpt: 9/29
2 FILER NAME State COPE Fund		3 Filer ID (Ethics Commission Filers) 00018807
4 Date 10/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edmondson, Oliver <hr/> 6 Contributor address; City; State; Zip Code Grand Prairie, TX 75052	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eliano, Cheryl <hr/> Contributor address; City; State; Zip Code Killeen, TX 76542	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Embree, Alice <hr/> Contributor address; City; State; Zip Code Austin, TX 78722	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ewig, Mark <hr/> Contributor address; City; State; Zip Code Denison, TX 75020	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Forbes, Lee <hr/> Contributor address; City; State; Zip Code Austin, TX 78754	Amount of Contribution (\$) \$27.78
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/22 Rpt: 10/29
2 FILER NAME State COPE Fund		3 Filer ID (Ethics Commission Filers) 00018807
4 Date 10/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gardner, John	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Arlington, TX 76012	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Ruben	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Rotan, TX 79546	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goines, Phyllis	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Ft. Worth, TX 76111	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Golden, Brian	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Arlington, TX 76012	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Golightly, Maxine	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Hallsville, TX 75650	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/22 Rpt: 11/29
2 FILER NAME State COPE Fund		3 Filer ID (Ethics Commission Filers) 00018807
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Ana	7 Amount of Contribution (\$) \$48.88
	6 Contributor address; City; State; Zip Code Austin, TX 78723	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Kelly	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code San Antonio, TX 78227	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gould, Michael	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Missouri City, TX 77459	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grady, Mark	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Humble, TX 77346	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greeley Jr., Walter	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Taylor, TX 76574	
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) AFGE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/22 Rpt: 12/29
2 FILER NAME State COPE Fund		3 Filer ID (Ethics Commission Filers) 00018807
4 Date 10/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grounds, Barry <hr/> 6 Contributor address; City; State; Zip Code La Porte, TX 77571	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guild, Lauren <hr/> Contributor address; City; State; Zip Code Austin, TX 78722	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hetzel, Edna <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77706-7383	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hinojosa, Mike <hr/> Contributor address; City; State; Zip Code Aubrey, TX 76227	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutchinson, Seth <hr/> Contributor address; City; State; Zip Code Austin, TX 78758	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/22 Rpt: 13/29
2 FILER NAME State COPE Fund		3 Filer ID (Ethics Commission Filers) 00018807
4 Date 10/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Javior, Paul <hr/> 6 Contributor address; City; State; Zip Code Adkins, TX 78101	7 Amount of Contribution (\$) \$8.33
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Willie <hr/> Contributor address; City; State; Zip Code Waco, TX 76710	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Annette <hr/> Contributor address; City; State; Zip Code Missouri City, TX 77489	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenyon, Billy <hr/> Contributor address; City; State; Zip Code Houston, TX 77065	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kissling, Irene <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78230	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/22 Rpt: 14/29
2 FILER NAME State COPE Fund		3 Filer ID (Ethics Commission Filers) 00018807
4 Date 10/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaPray, Matthew <hr/> 6 Contributor address; City; State; Zip Code Vidor, TX 77662	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Latson, Charice <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78245	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levy, Rick <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$27.78
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Kimetra <hr/> Contributor address; City; State; Zip Code Lancaster, TX 75146	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Jason <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/22 Rpt: 15/29
2 FILER NAME State COPE Fund		3 Filer ID (Ethics Commission Filers) 00018807
4 Date 10/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez Jr., David <hr/> 6 Contributor address; City; State; Zip Code Waxahachie, TX 75167	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/10/2024	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 (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malfaro, Louis <hr/> Contributor address; City; State; Zip Code Austin, TX 78702	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manion, Luke <hr/> Contributor address; City; State; Zip Code Houston, TX 77009	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Diane <hr/> Contributor address; City; State; Zip Code Spring, TX 77386	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/22 Rpt: 16/29
2 FILER NAME State COPE Fund		3 Filer ID (Ethics Commission Filers) 00018807
4 Date 10/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathias, Bonnie <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75217	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayo, Donny <hr/> Contributor address; City; State; Zip Code Thornton, TX 76687	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMahan, Diana <hr/> Contributor address; City; State; Zip Code LaPorte, TX 77571-4010	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Medley, Thornton <hr/> Contributor address; City; State; Zip Code Santa Fe, TX 77510	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Mark <hr/> Contributor address; City; State; Zip Code Millsap, TX 76066	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Mechanic		Employer (See Instructions) Lockheed Martin

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/22 Rpt: 17/29
2 FILER NAME State COPE Fund		3 Filer ID (Ethics Commission Filers) 00018807
4 Date 10/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mims, Pauline <hr/> 6 Contributor address; City; State; Zip Code Arlington, TX 76001	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montemayor, Joe <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montemayor, Lorraine <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Micky <hr/> Contributor address; City; State; Zip Code Dallas, TX 75233	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nauls, James <hr/> Contributor address; City; State; Zip Code Missouri City, TX 77489	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/22 Rpt: 18/29
2 FILER NAME State COPE Fund		3 Filer ID (Ethics Commission Filers) 00018807
4 Date 10/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Sullivan, John <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78741	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oppenheim, Richard <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78213	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ormsby, Jeff <hr/> Contributor address; City; State; Zip Code Lexington, TX 78947	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ortiz, Beverly <hr/> Contributor address; City; State; Zip Code Houston, TX 77027	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Osobase, Derrick <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/22 Rpt: 19/29
2 FILER NAME State COPE Fund		3 Filer ID (Ethics Commission Filers) 00018807
4 Date 10/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paez, Donna <hr/> 6 Contributor address; City; State; Zip Code South Houston, TX 77587	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pannell, Ann <hr/> Contributor address; City; State; Zip Code Austin, TX 78748-5240	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez-Wiseley, Teresa <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pollock, Ryan <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramos, Pauline <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76133	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/22 Rpt: 20/29
2 FILER NAME State COPE Fund		3 Filer ID (Ethics Commission Filers) 00018807
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramos, Terri <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78210	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reagan, Joanna <hr/> Contributor address; City; State; Zip Code Bullard, TX 75757	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reid, Edward <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78249	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riggs, Carolyn <hr/> Contributor address; City; State; Zip Code Houston, TX 77044-2672	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rocha, Cindy <hr/> Contributor address; City; State; Zip Code Crowley, TX 76036	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/22 Rpt: 21/29
2 FILER NAME State COPE Fund		3 Filer ID (Ethics Commission Filers) 00018807
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rocha, Cindy <hr/> 6 Contributor address; City; State; Zip Code Crowley, TX 76036	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Carlos <hr/> Contributor address; City; State; Zip Code Los Fresnos, TX 78566	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salazar, Richard <hr/> Contributor address; City; State; Zip Code Rusk, TX 75785	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salgado, Jesus <hr/> Contributor address; City; State; Zip Code Del Rio, TX 78840	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salinas, Christopher <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78411	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/22 Rpt: 22/29
2 FILER NAME State COPE Fund		3 Filer ID (Ethics Commission Filers) 00018807
4 Date 10/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanchez, Roy	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code Houston, TX 77029		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulze, Jeanne	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Flower Mound, TX 75028		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Richard	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Houston, TX 77043		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sills, Ed	Amount of Contribution (\$) \$27.78
Contributor address; City; State; Zip Code Austin, TX 78759		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Singletary, Charlie	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code West Columbia, TX 77486		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/22 Rpt: 23/29
2 FILER NAME State COPE Fund		3 Filer ID (Ethics Commission Filers) 00018807
4 Date 10/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Small, Reginald <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75232	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Speight, Emily <hr/> Contributor address; City; State; Zip Code Austin, TX 78739	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Suplee, Robert <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76109	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tanguma, Sylvia <hr/> Contributor address; City; State; Zip Code Edinburg, TX 78539	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Irmalyn <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77705	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/22 Rpt: 24/29
2 FILER NAME State COPE Fund		3 Filer ID (Ethics Commission Filers) 00018807
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Maria	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code Pflugerville, TX 78660		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Paul	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code El Paso, TX 79902		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson-Lutz, Katherine	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code New Braunfels, TX 78132		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tilley, Earnest	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Forney, TX 75126		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tiner, Kirk	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Arlington, TX 76017		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/22 Rpt: 25/29
2 FILER NAME State COPE Fund		3 Filer ID (Ethics Commission Filers) 00018807
4 Date 10/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Jose <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77011	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/09/2024	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 (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vera, Nancy <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78415	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villarreal, Carlos <hr/> Contributor address; City; State; Zip Code Houston, TX 77049	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warwick III, Price <hr/> Contributor address; City; State; Zip Code Arlington, TX 76018	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/22 Rpt: 26/29
2 FILER NAME State COPE Fund		3 Filer ID (Ethics Commission Filers) 00018807
4 Date 10/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Washenfelder, Karrie	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code Richmond, TX 77469		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitaker, Charles	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Terrell, TX 75160		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiltz, Debbie	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Houston, TX 77028		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Worthey, Joshua	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Granbury, TX 76049		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, W. R.	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Austin, TX 78748-5038		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C4

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C4: Sch: 1/1 Rpt: 27/29
2 FILER NAME State COPE Fund		3 Filer ID (Ethics Commission Filers) 00018807
4 Date 10/04/2024	5 Corporation / Labor Organization name Texas AFL-CIO	6 Amount (\$) 142.21
Date 10/07/2024	Corporation / Labor Organization name Texas AFL-CIO	Amount (\$) 142.21
Date 10/25/2024	Corporation / Labor Organization name Texas AFL-CIO	Amount (\$) 81.26

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: 1/2 Rpt: 28/29	2 FILER NAME State COPE Fund	3 Filer ID (Ethics Commission Filers) 00018807
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4 Date 10/22/2024	5 Payee name Brett Robinson Campaign
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6 Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 761 Cypress, TX 77410
---	--

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Contribution HD 130
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/22/2024	Payee name Doug Peterson Campaign
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Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 22118 Cherrytree Ridge Ln Houston, TX 77062
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Contribution HD 129
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/02/2024	Payee name Elavon
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Amount (\$) \$26.51 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7300 Chapman Hwy Knoxville, TN 37920
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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 Credit Card Processing Fees
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 2/2 Rpt: 29/29	2 FILER NAME State COPE Fund	3 Filer ID (Ethics Commission Filers) 00018807
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4 Date 10/22/2024	5 Payee name Jonathan Gracia Campaign
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6 Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 932 East Van Buren Brownsville, TX 78520
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Contribution HD 37
---------------------------------	---	---

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/22/2024	Payee name Mariana Casarez Campaign
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Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 808 W Lee Ave Kingsville, TX 78363
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Contribution HD 43
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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