

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

|   |  |   |   |  |                                 |                                |      |
|---|--|---|---|--|---------------------------------|--------------------------------|------|
| <b>The C/OH Instruction Guide explains how to complete this form.</b>                               |  | <b>1</b> Filer ID<br>(Ethics Commission Filers)<br>00087920 | <b>2</b> Total pages filed:<br>157          |  |                                 |                                |      |
| <b>3</b> CANDIDATE / OFFICEHOLDER NAME  | MS / MRS / MR  | FIRST<br>Kristian   | MI<br>MI                                    | <b>OFFICE USE ONLY</b><br><br>Date Received<br><b>ELECTRONICALLY FILED</b><br>10/28/2024 |                                 |                                |      |
|   | NICKNAME   | LAST<br>Carranza  | SUFFIX                                      |  |                                 |                                |      |
| <b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS<br><br><input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE<br>P.O. Box 831436<br><br>San Antonio, TX 78283  |   |   | Date Hand-delivered or Date Postmarked   |                                 |                                |      |
|   |  |   |   | Receipt #      Amount  |                                 |                                |      |
|   |  |   |   | Date Processed   |                                 |                                |      |
|   |  |   |   | Date Imaged  |                                 |                                |      |
| <b>5</b> CAMPAIGN TREASURER NAME  | MS / MRS / MR  | FIRST<br>Darren   | MI<br>MI                                    |  |                                 |                                |      |
|   | NICKNAME   | LAST<br>Meritz  | SUFFIX                                      |  |                                 |                                |      |
| <b>6</b> CAMPAIGN TREASURER ADDRESS<br><br>(Residence or Business)                                  | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE<br>P.O. Box 831436<br><br>San Antonio, TX 78283  |   |   |  |                                 |                                |      |
|   |  |   |   |  |                                 |                                |      |
| <b>7</b> CAMPAIGN TREASURER PHONE   | AREA CODE  | PHONE NUMBER  | EXTENSION                                   |  |                                 |                                |      |
|   | (915)  | 274-2501  |   |  |                                 |                                |      |
| <b>8</b> REPORT TYPE  | <input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) |   |   |  |                                 |                                |      |
|   | <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)   |   |   |  |                                 |                                |      |
| <b>9</b> PERIOD COVERED   | Month  | Day   | Year  | THROUGH  | Month                           | Day                            | Year |
|   | 09   | 27  | 2024  |  | 10                              | 26                             | 2024 |
| <b>10</b> ELECTION  | ELECTION DATE<br>Month    Day    Year<br>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   |                                 |                                |      |
| <b>11</b> OFFICE  | OFFICE HELD (if any)   |   |   | <b>12</b> OFFICE SOUGHT (if known)<br>State Representative District 118                  |                                 |                                |      |

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

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|  |   |
|--|---|
| <b>13 C / OH NAME</b> Carranza, Kristian | <b>14 Filer ID</b> (Ethics Commission Filers)<br>00087920 |
|--|---|

|   |  |   |
|---|--|---|
| <b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b><br><br><input type="checkbox"/> Additional Pages | This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures. |   |
|   | <b>COMMITTEE TYPE</b><br><br><input type="checkbox"/> GENERAL<br><br><input type="checkbox"/> SPECIFIC   | <b>COMMITTEE NAME</b>                       |
|   |  | <b>COMMITTEE ADDRESS</b>                    |
|   |  | <b>COMMITTEE CAMPAIGN TREASURER NAME</b>    |
|   |  | <b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b> |

|                                |   |    |              |
|--------------------------------|---|----|--------------|
| <b>16 CONTRIBUTION TOTALS</b>  | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ | 0.00         |
|                                | 2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)   | \$ | 1,619,637.14 |
| <b>EXPENDITURE TOTALS</b>      | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES  | \$ | 0.00         |
|                                | 4. <b>TOTAL POLITICAL EXPENDITURES</b>  | \$ | 1,541,741.52 |
| <b>CONTRIBUTION BALANCE</b>    | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD  | \$ | 190,928.62   |
| <b>OUTSTANDING LOAN TOTALS</b> | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD   | \$ | 0.00         |

**17 AFFIDAVIT**

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

Kristian Carranza  
 \_\_\_\_\_  
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

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

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|  |  |                                |                            |
|--|--|--------------------------------|----------------------------|
| <b>18 FILER NAME</b><br>Carranza, Kristian       |  | <b>19 Filer ID</b><br>00087920 | (Ethics Commission Filers) |
| <b>20 SCHEDULE SUBTOTALS</b><br>NAME OF SCHEDULE |  | SUBTOTAL AMOUNT                |                            |
| 1.   | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                                      | \$                             | 1,544,718.71               |
| 2.   | <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                        | \$                             | 74,918.43                  |
| 3.   | <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS   | \$                             |                            |
| 4.   | <input type="checkbox"/> SCHEDULE E: LOANS   | \$                             |                            |
| 5.   | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS                   | \$                             | 1,541,741.52               |
| 6.   | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS  | \$                             |                            |
| 7.   | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS                             | \$                             |                            |
| 8.   | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD   | \$                             |                            |
| 9.   | <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS  | \$                             |                            |
| 10.  | <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH                        | \$                             |                            |
| 11.  | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS                           | \$                             |                            |
| 12.  | <input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$                             | 20.63                      |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |   |   |
|--|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>                 |   | <b>1</b> Total pages Schedule A1:<br>Sch: 1/95 Rpt: 4/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian  |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920  |
| <b>4</b> Date<br>09/27/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Abbott, Adam | <b>7</b> Amount of Contribution (\$)<br><br>\$5.00        |
| <b>6</b> Contributor address; City; State; Zip Code<br><br>Colleyville, TX 76034 |   |   |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed     |   | <b>9</b> Employer (See Instructions)<br>Not Employed      |
| Date<br>10/01/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Adams, Bruce          | Amount of Contribution (\$)<br><br>\$75.53                |
| Contributor address; City; State; Zip Code<br><br>Sugar Land, TX 77478           |   |   |
| Principal occupation / Job title (See Instructions)<br>Not Employed              |   | Employer (See Instructions)<br>Not Employed               |
| Date<br>10/05/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Adams, Chris          | Amount of Contribution (\$)<br><br>\$4.54                 |
| Contributor address; City; State; Zip Code<br><br>Washington, DC 20012-2617      |   |   |
| Principal occupation / Job title (See Instructions)<br>Software Developer        |   | Employer (See Instructions)<br>The Library of Congress    |
| Date<br>10/13/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Albert, David         | Amount of Contribution (\$)<br><br>\$500.00               |
| Contributor address; City; State; Zip Code<br><br>Austin, TX 78741               |   |   |
| Principal occupation / Job title (See Instructions)<br>Austin Community College  |   | Employer (See Instructions)<br>Professor                  |
| Date<br>10/13/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Albert, David         | Amount of Contribution (\$)<br><br>\$250.00               |
| Contributor address; City; State; Zip Code<br><br>Austin, TX 78741               |   |   |
| Principal occupation / Job title (See Instructions)<br>Austin Community College  |   | Employer (See Instructions)<br>Professor                  |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |   |   |
|---|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>          |   | <b>1</b> Total pages Schedule A1:<br>Sch: 2/95 Rpt: 5/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                 |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920  |
| <b>4</b> Date<br>10/04/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Alcoser, Anthony<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78201 | <b>7</b> Amount of Contribution (\$)<br><br>\$100.00      |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Professor |   | <b>9</b> Employer (See Instructions)<br>St Mary's         |
| Date<br>09/30/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>All In PAC<br><hr/> Contributor address; City; State; Zip Code<br><br>Dallas, TX 75360                              | Amount of Contribution (\$)<br><br>\$2,000.00             |
| Principal occupation / Job title (See Instructions)                       |   | Employer (See Instructions)                               |
| Date<br>10/18/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Allen-Savietta, Cora<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78752                    | Amount of Contribution (\$)<br><br>\$1.00                 |
| Principal occupation / Job title (See Instructions)<br>Statistician       |   | Employer (See Instructions)<br>Berry Consultants          |
| Date<br>10/05/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Alonso, Arnoldo<br><hr/> Contributor address; City; State; Zip Code<br><br>Laredo, TX 78040                         | Amount of Contribution (\$)<br><br>\$80.00                |
| Principal occupation / Job title (See Instructions)<br>Not Employed       |   | Employer (See Instructions)<br>Not Employed               |
| Date<br>10/16/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Altamirano, Alberto<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78215                | Amount of Contribution (\$)<br><br>\$250.00               |
| Principal occupation / Job title (See Instructions)<br>CEO                |   | Employer (See Instructions)<br>Irys Technologies          |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |   |   |
|--|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>       |   | <b>1</b> Total pages Schedule A1:<br>Sch: 3/95 Rpt: 6/157     |
| <b>2</b> FILER NAME<br>Carranza, Kristian                              |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920      |
| <b>4</b> Date<br>10/06/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Anderson, David<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78704 | <b>7</b> Amount of Contribution (\$)<br><br>\$100.00          |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Lawyer |   | <b>9</b> Employer (See Instructions)<br>Raise Your Hand Texas |
| Date<br>10/02/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Annie's List<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78703                      | Amount of Contribution (\$)<br><br>\$20,000.00                |
| Principal occupation / Job title (See Instructions)                    |   | Employer (See Instructions)                                   |
| Date<br>10/25/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Annie's List<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78703                      | Amount of Contribution (\$)<br><br>\$10,000.00                |
| Principal occupation / Job title (See Instructions)                    |   | Employer (See Instructions)                                   |
| Date<br>10/07/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Appleman, Gordon<br><hr/> Contributor address; City; State; Zip Code<br><br>Fort Worth, TX 76109              | Amount of Contribution (\$)<br><br>\$150.00                   |
| Principal occupation / Job title (See Instructions)<br>Retired         |   | Employer (See Instructions)<br>Retired                        |
| Date<br>10/24/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Archer, Christian<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78212            | Amount of Contribution (\$)<br><br>\$10,000.00                |
| Principal occupation / Job title (See Instructions)<br>Consultant      |   | Employer (See Instructions)<br>Self                           |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |   |   |
|--|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>     |   | 1 Total pages Schedule A1:<br>Sch: 4/95 Rpt: 7/157        |
| 2 FILER NAME<br>Carranza, Kristian                                   |   | 3 Filer ID (Ethics Commission Filers)<br>00087920         |
| 4 Date<br>10/05/2024   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Ardington, Amy                                | 7 Amount of Contribution (\$) \$48.00                     |
|  | 6 Contributor address; City; State; Zip Code<br><br>Bellville, TX 77418   |   |
| 8 Principal occupation / Job title (See Instructions)<br>Retired     |   | 9 Employer (See Instructions)<br>None                     |
| Date<br>10/10/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Arguijo, Tanya                                  | Amount of Contribution (\$) \$25.00                       |
|  | Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78230   |   |
| Principal occupation / Job title (See Instructions)<br>Event Planner |   | Employer (See Instructions)<br>San Japan LLC              |
| Date<br>10/25/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Association of Texas Professional Educators PAC | Amount of Contribution (\$) \$3,000.00                    |
|  | Contributor address; City; State; Zip Code<br><br>Austin, TX 78752  |   |
| Principal occupation / Job title (See Instructions)                  |   | Employer (See Instructions)                               |
| Date<br>09/30/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Atlas, Nancy                                    | Amount of Contribution (\$) \$400.00                      |
|  | Contributor address; City; State; Zip Code<br><br>Houston, TX 77098   |   |
| Principal occupation / Job title (See Instructions)<br>Mediator      |   | Employer (See Instructions)<br>Self                       |
| Date<br>09/30/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Avellar, Michael                                | Amount of Contribution (\$) \$300.00                      |
|  | Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78209   |   |
| Principal occupation / Job title (See Instructions)<br>Executive     |   | Employer (See Instructions)<br>Performance Management Ltd |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |   |  |
|--|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>           |   | <b>1</b> Total pages Schedule A1:<br>Sch: 5/95 Rpt: 8/157      |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                  |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920       |
| <b>4</b> Date<br>09/27/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Avery, Rita<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78201 | <b>7</b> Amount of Contribution (\$)<br><br>\$50.00            |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Office Mgr |   | <b>9</b> Employer (See Instructions)<br>Avery Insurance Agency |
| Date<br>10/22/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Avey, Ethan<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78703                        | Amount of Contribution (\$)<br><br>\$25.00                     |
| Principal occupation / Job title (See Instructions)<br>Not Employed        |   | Employer (See Instructions)<br>Not Employed                    |
| Date<br>10/06/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Ayala, David<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77098                      | Amount of Contribution (\$)<br><br>\$15.00                     |
| Principal occupation / Job title (See Instructions)<br>Payroll Service Rep |   | Employer (See Instructions)<br>Houston Community College       |
| Date<br>10/16/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Ayala, David<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77098                      | Amount of Contribution (\$)<br><br>\$25.00                     |
| Principal occupation / Job title (See Instructions)<br>Payroll Service Rep |   | Employer (See Instructions)<br>Houston Community College       |
| Date<br>09/28/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>BREEN, MARY<br><hr/> Contributor address; City; State; Zip Code<br><br>Glen Rock, PA 17327                     | Amount of Contribution (\$)<br><br>\$25.00                     |
| Principal occupation / Job title (See Instructions)<br>Not Employed        |   | Employer (See Instructions)<br>Not Employed                    |



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>             |   | <b>1</b> Total pages Schedule A1:<br>Sch: 6/95 Rpt: 9/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                    |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920  |
| <b>4</b> Date<br>10/09/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>BURNETT, NANCY<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78230 | <b>7</b> Amount of Contribution (\$)<br><br>\$10.00       |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed |   | <b>9</b> Employer (See Instructions)<br>Not Employed      |
| Date<br>10/20/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Bailey, John<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78209                     | Amount of Contribution (\$)<br><br>\$35.00                |
| Principal occupation / Job title (See Instructions)<br>Climate Advisor       |   | Employer (See Instructions)<br>NRDC                       |
| Date<br>09/30/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Bakale, Amanda<br><hr/> Contributor address; City; State; Zip Code<br><br>New York, NY 10023                      | Amount of Contribution (\$)<br><br>\$5.00                 |
| Principal occupation / Job title (See Instructions)<br>Attorney              |   | Employer (See Instructions)<br>BrandEd                    |
| Date<br>10/13/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Baker, Mary<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78726                           | Amount of Contribution (\$)<br><br>\$50.00                |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |   | Employer (See Instructions)<br>Not Employed               |
| Date<br>10/10/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Baker, Samuel<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78723-5397                    | Amount of Contribution (\$)<br><br>\$250.00               |
| Principal occupation / Job title (See Instructions)<br>Teacher               |   | Employer (See Instructions)<br>University of Texas        |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |   |   |
|--|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>             |   | <b>1</b> Total pages Schedule A1:<br>Sch: 7/95 Rpt: 10/157    |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                    |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920      |
| <b>4</b> Date<br>10/12/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Barg, Irl<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78701 | <b>7</b> Amount of Contribution (\$)<br><br>\$200.00          |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed |   | <b>9</b> Employer (See Instructions)<br>Not Employed          |
| Date<br>10/23/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Barnave, Serge<br><hr/> Contributor address; City; State; Zip Code<br><br>Bayside Queens, NY 11360-1414 | Amount of Contribution (\$)<br><br>\$5.00                     |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |   | Employer (See Instructions)<br>Not Employed                   |
| Date<br>10/10/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Barnes, Bonner<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77008             | Amount of Contribution (\$)<br><br>\$250.00                   |
| Principal occupation / Job title (See Instructions)<br>Investment Advisor    |   | Employer (See Instructions)<br>Cord Investment Management LLC |
| Date<br>10/03/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Barnett, Byron<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78254         | Amount of Contribution (\$)<br><br>\$250.00                   |
| Principal occupation / Job title (See Instructions)<br>Attorney              |   | Employer (See Instructions)<br>Self                           |
| Date<br>09/27/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Barsenas, James<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78221        | Amount of Contribution (\$)<br><br>\$25.00                    |
| Principal occupation / Job title (See Instructions)<br>Customer Rep          |   | Employer (See Instructions)<br>Bell & McCoy                   |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>               |   | <b>1</b> Total pages Schedule A1:<br>Sch: 8/95 Rpt: 11/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                      |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920   |
| <b>4</b> Date<br>10/16/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Bartos, Janet P<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Little Rock, AR 72223-4297 | <b>7</b> Amount of Contribution (\$)<br><br>\$10.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed   |   | <b>9</b> Employer (See Instructions)<br>Not Employed       |
| Date<br>10/21/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Batdorf, Joseph<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77077                            | Amount of Contribution (\$)<br><br>\$2,500.00              |
| Principal occupation / Job title (See Instructions)<br>President               |   | Employer (See Instructions)<br>J Turner Research           |
| Date<br>10/03/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Bates, Katherine<br><hr/> Contributor address; City; State; Zip Code<br><br>McKinney, TX 75071                          | Amount of Contribution (\$)<br><br>\$25.00                 |
| Principal occupation / Job title (See Instructions)<br>Not Employed            |   | Employer (See Instructions)<br>Not Employed                |
| Date<br>10/18/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Bauserman, Robert<br><hr/> Contributor address; City; State; Zip Code<br><br>Owings Mills, MD 21117                     | Amount of Contribution (\$)<br><br>\$1.25                  |
| Principal occupation / Job title (See Instructions)<br>Health Research Manager |   | Employer (See Instructions)<br>Williams Consulting LLC     |
| Date<br>10/16/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Bell, Megan<br><hr/> Contributor address; City; State; Zip Code<br><br>Washington, DC 20015                             | Amount of Contribution (\$)<br><br>\$20.00                 |
| Principal occupation / Job title (See Instructions)<br>Advisor                 |   | Employer (See Instructions)<br>White House                 |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>       |  | <b>1</b> Total pages Schedule A1:<br>Sch: 9/95 Rpt: 12/157   |
| <b>2</b> FILER NAME<br>Carranza, Kristian                              |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920     |
| <b>4</b> Date<br>10/23/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Benefiel, Hillary<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Los Angeles, CA 91601 | <b>7</b> Amount of Contribution (\$)<br><br>\$50.00          |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Writer |  | <b>9</b> Employer (See Instructions)<br>Open the Lights Inc. |
| Date<br>10/07/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Benson, Kimberly<br><hr/> Contributor address; City; State; Zip Code<br><br>Germantown, MD 20876                     | Amount of Contribution (\$)<br><br>\$1.00                    |
| Principal occupation / Job title (See Instructions)<br>Pharmacologist  |  | Employer (See Instructions)<br>US FDA                        |
| Date<br>10/12/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Berebitsky, Larry<br><hr/> Contributor address; City; State; Zip Code<br><br>Olympia, WA 98501-7034                  | Amount of Contribution (\$)<br><br>\$10.00                   |
| Principal occupation / Job title (See Instructions)<br>Accountant      |  | Employer (See Instructions)<br>Seabrook                      |
| Date<br>10/09/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Bernal, Mary<br><hr/> Contributor address; City; State; Zip Code<br><br>Universal city, TX 78148                     | Amount of Contribution (\$)<br><br>\$20.00                   |
| Principal occupation / Job title (See Instructions)<br>Not Employed    |  | Employer (See Instructions)<br>Not Employed                  |
| Date<br>10/06/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Bexar County Justice PAC<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78212            | Amount of Contribution (\$)<br><br>\$25,000.00               |
| Principal occupation / Job title (See Instructions)                    |  | Employer (See Instructions)                                  |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>             |   | <b>1</b> Total pages Schedule A1:<br>Sch: 10/95 Rpt: 13/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                    |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/04/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Bhuyan-Duncan, Leela<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>The Woodlands, TX 77382 | <b>7</b> Amount of Contribution (\$)<br><br>\$50.00         |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Professor    |   | <b>9</b> Employer (See Instructions)<br>Lone Star College   |
| Date<br>10/08/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Binford, Lincoln<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78756                              | Amount of Contribution (\$)<br><br>\$100.00                 |
| Principal occupation / Job title (See Instructions)<br>Massage Therapist     |   | Employer (See Instructions)<br>Self                         |
| Date<br>10/16/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Black, Mary<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78756                                   | Amount of Contribution (\$)<br><br>\$2.08                   |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |   | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/13/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Blanco, Jorge<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78218                            | Amount of Contribution (\$)<br><br>\$100.00                 |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |   | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/09/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Boswell, Lynn<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78703                                 | Amount of Contribution (\$)<br><br>\$250.00                 |
| Principal occupation / Job title (See Instructions)<br>Documentary Filmmaker |   | Employer (See Instructions)<br>Villita Media                |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>             |  | <b>1</b> Total pages Schedule A1:<br>Sch: 11/95 Rpt: 14/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                    |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/08/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Boule, James<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Sacramento, CA 95835 | <b>7</b> Amount of Contribution (\$)<br><br>\$1.66          |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed |  | <b>9</b> Employer (See Instructions)<br>Not Employed        |
| Date<br>09/27/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Boutard, Caroline<br><hr/> Contributor address; City; State; Zip Code<br><br>Penn Yan, NY 14257                | Amount of Contribution (\$)<br><br>\$100.00                 |
| Principal occupation / Job title (See Instructions)<br>Farmer                |  | Employer (See Instructions)<br>Self                         |
| Date<br>10/15/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Bowles, Cole<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78253                  | Amount of Contribution (\$)<br><br>\$18.00                  |
| Principal occupation / Job title (See Instructions)<br>Political Consultant  |  | Employer (See Instructions)<br>Self                         |
| Date<br>10/14/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Boyd, Rebecca<br><hr/> Contributor address; City; State; Zip Code<br><br>Bend, OR 97703                        | Amount of Contribution (\$)<br><br>\$2.50                   |
| Principal occupation / Job title (See Instructions)<br>Voiceover             |  | Employer (See Instructions)<br>Self                         |
| Date<br>10/06/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Braufman, Jill<br><hr/> Contributor address; City; State; Zip Code<br><br>Rockville Centre, NY 11570           | Amount of Contribution (\$)<br><br>\$1,000.00               |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |  | Employer (See Instructions)<br>Not Employed                 |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>             |  | <b>1</b> Total pages Schedule A1:<br>Sch: 12/95 Rpt: 15/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                    |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>09/28/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Briones, Lesley | <b>7</b> Amount of Contribution (\$) \$500.00               |
| <b>6</b> Contributor address; City; State; Zip Code<br><br>Houston, TX 77008 |  |   |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Commissioner |  | <b>9</b> Employer (See Instructions)<br>Harris County       |
| Date<br>10/26/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Brodsky, Nina            | Amount of Contribution (\$) \$2.50                          |
| Contributor address; City; State; Zip Code<br><br>Austin, TX 78731           |  |   |
| Principal occupation / Job title (See Instructions)<br>Bookkeeper and Artist |  | Employer (See Instructions)<br>Self                         |
| Date<br>09/28/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Bronstein, Dale          | Amount of Contribution (\$) \$10.00                         |
| Contributor address; City; State; Zip Code<br><br>Fort Worth, TX 76112       |  |   |
| Principal occupation / Job title (See Instructions)<br>Wine Merchant         |  | Employer (See Instructions)<br>Mr.                          |
| Date<br>09/27/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Brooker, Robert          | Amount of Contribution (\$) \$500.00                        |
| Contributor address; City; State; Zip Code<br><br>Austin, TX 78738           |  |   |
| Principal occupation / Job title (See Instructions)<br>Real Estate           |  | Employer (See Instructions)<br>Alom LLC                     |
| Date<br>10/21/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Brown, Ben               | Amount of Contribution (\$) \$166.67                        |
| Contributor address; City; State; Zip Code<br><br>Austin, TX 78704           |  |   |
| Principal occupation / Job title (See Instructions)<br>Software Developer    |  | Employer (See Instructions)<br>Microsoft                    |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>           |  | <b>1</b> Total pages Schedule A1:<br>Sch: 13/95 Rpt: 16/157            |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                  |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920               |
| <b>4</b> Date<br>10/13/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Brumer, Jonathan<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Washington, DC 20015 | <b>7</b> Amount of Contribution (\$)<br><br>\$50.00                    |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Attorney   |  | <b>9</b> Employer (See Instructions)<br>Federal Government             |
| Date<br>10/02/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Bruno, Paul<br><hr/> Contributor address; City; State; Zip Code<br><br>Champaign, IL 61820                         | Amount of Contribution (\$)<br><br>\$25.00                             |
| Principal occupation / Job title (See Instructions)<br>Assistant Professor |  | Employer (See Instructions)<br>University of Illinois Urbana-Champaign |
| Date<br>10/04/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Bryant, Deborah<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77055                       | Amount of Contribution (\$)<br><br>\$100.00                            |
| Principal occupation / Job title (See Instructions)<br>Retired             |  | Employer (See Instructions)<br>Retired                                 |
| Date<br>10/06/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Burtis, Theodore<br><hr/> Contributor address; City; State; Zip Code<br><br>Germantown, NY 12526                   | Amount of Contribution (\$)<br><br>\$10.00                             |
| Principal occupation / Job title (See Instructions)<br>Not Employed        |  | Employer (See Instructions)<br>Not Employed                            |
| Date<br>10/06/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Butz, Alaine<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77096                          | Amount of Contribution (\$)<br><br>\$5.00                              |
| Principal occupation / Job title (See Instructions)<br>Not Employed        |  | Employer (See Instructions)<br>Not Employed                            |



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>                |  | <b>1</b> Total pages Schedule A1:<br>Sch: 14/95 Rpt: 17/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                       |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>09/28/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>CONARD, JOANN<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Bakersfield, CA 93312 | <b>7</b> Amount of Contribution (\$)<br><br>\$1.25          |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed    |  | <b>9</b> Employer (See Instructions)<br>Not Employed        |
| Date<br>10/02/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>CONNAH, GRAHAM<br><hr/> Contributor address; City; State; Zip Code<br><br>Baltimore, MD 21211                    | Amount of Contribution (\$)<br><br>\$19.00                  |
| Principal occupation / Job title (See Instructions)<br>Not Employed             |  | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/16/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>CWA Local 6143<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78215                  | Amount of Contribution (\$)<br><br>\$3,167.00               |
| Principal occupation / Job title (See Instructions)                             |  | Employer (See Instructions)                                 |
| Date<br>09/28/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Cadena, Omar<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78245                    | Amount of Contribution (\$)<br><br>\$5.00                   |
| Principal occupation / Job title (See Instructions)<br>Systems Analyst          |  | Employer (See Instructions)<br>Schlumberger                 |
| Date<br>10/10/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Calef, Fred<br><hr/> Contributor address; City; State; Zip Code<br><br>Huntington Beach, CA 92647                | Amount of Contribution (\$)<br><br>\$100.00                 |
| Principal occupation / Job title (See Instructions)<br>Science Systems Engineer |  | Employer (See Instructions)<br>Caltech                      |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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|---|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>              |   | 1 Total pages Schedule A1:<br>Sch: 15/95 Rpt: 18/157  |
| 2 FILER NAME<br>Carranza, Kristian  |   | 3 Filer ID (Ethics Commission Filers)<br>00087920     |
| 4 Date<br>10/03/2024  | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Campaign, Richard Raymond | 7 Amount of Contribution (\$)<br>\$5,000.00           |
|   | 6 Contributor address; City; State; Zip Code<br><br>Laredo, TX 78045  |   |
| 8 Principal occupation / Job title (See Instructions)<br>State Representative |   | 9 Employer (See Instructions)<br>State of Texas       |
| Date<br>09/28/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Campbell, Kathleen          | Amount of Contribution (\$)<br>\$50.00                |
|   | Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78204   |   |
| Principal occupation / Job title (See Instructions)<br>Not Employed           |   | Employer (See Instructions)<br>Not Employed           |
| Date<br>10/23/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Carlson, Allen              | Amount of Contribution (\$)<br>\$100.00               |
|   | Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78230   |   |
| Principal occupation / Job title (See Instructions)<br>Not Employed           |   | Employer (See Instructions)<br>Not Employed           |
| Date<br>10/13/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Carranza, Susana            | Amount of Contribution (\$)<br>\$20.00                |
|   | Contributor address; City; State; Zip Code<br><br>Austin, TX 78701  |   |
| Principal occupation / Job title (See Instructions)<br>Chemical Engineer      |   | Employer (See Instructions)<br>Makel Engineering Inc. |
| Date<br>10/24/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Carrillo-Valdez, Lydia      | Amount of Contribution (\$)<br>\$25.00                |
|   | Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78240   |   |
| Principal occupation / Job title (See Instructions)<br>Not Employed           |   | Employer (See Instructions)<br>Not Employed           |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>             |  | <b>1</b> Total pages Schedule A1:<br>Sch: 16/95 Rpt: 19/157  |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                    |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920     |
| <b>4</b> Date<br>10/11/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Casebier, Cecil<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78209 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00          |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed |  | <b>9</b> Employer (See Instructions)<br>Not Employed         |
| Date<br>10/17/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Castro for Congress<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78292               | Amount of Contribution (\$)<br><br>\$1,000.00                |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |  | Employer (See Instructions)<br>Not Employed                  |
| Date<br>10/18/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Castro, Maria Delrosario<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78228          | Amount of Contribution (\$)<br><br>\$50.00                   |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |  | Employer (See Instructions)<br>Not Employed                  |
| Date<br>09/27/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Cavender, Catriona<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78212                | Amount of Contribution (\$)<br><br>\$18.00                   |
| Principal occupation / Job title (See Instructions)<br>Attorney              |  | Employer (See Instructions)<br>Hornberger Fuller & Garza Inc |
| Date<br>09/28/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Chapman, Ron<br><hr/> Contributor address; City; State; Zip Code<br><br>Phoenix, AZ 85014                          | Amount of Contribution (\$)<br><br>\$23.00                   |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |  | Employer (See Instructions)<br>Not Employed                  |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>             |  | <b>1</b> Total pages Schedule A1:<br>Sch: 17/95 Rpt: 20/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                    |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/06/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Chapman, Ron  | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00         |
| <b>6</b> Contributor address; City; State; Zip Code<br><br>Phoenix, AZ 85014 |  |   |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed |  | <b>9</b> Employer (See Instructions)<br>Not Employed        |
| Date<br>10/06/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Chapman, Ron           | Amount of Contribution (\$)<br><br>\$25.00                  |
| Contributor address; City; State; Zip Code<br><br>Phoenix, AZ 85014          |  |   |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |  | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/07/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Charnsangavej, Larissa | Amount of Contribution (\$)<br><br>\$6.00                   |
| Contributor address; City; State; Zip Code<br><br>Oakland, CA 94607          |  |   |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |  | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/24/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Chase, David           | Amount of Contribution (\$)<br><br>\$100.00                 |
| Contributor address; City; State; Zip Code<br><br>Belmont, MA 02478          |  |   |
| Principal occupation / Job title (See Instructions)<br>Software Developer    |  | Employer (See Instructions)<br>Google LLC                   |
| Date<br>10/15/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Chavez, John           | Amount of Contribution (\$)<br><br>\$50.00                  |
| Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78247      |  |   |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |  | Employer (See Instructions)<br>Not Employed                 |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |  |   |
|---|--|---|
| <b>The Instruction Guide explains how to complete this form.</b>                        |  | <b>1</b> Total pages Schedule A1:<br>Sch: 18/95 Rpt: 21/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian   |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/21/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Chelsea, Betancourt<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Universal City, TX 78148-4512 | <b>7</b> Amount of Contribution (\$)<br><br>\$50.00         |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Csm                     |  | <b>9</b> Employer (See Instructions)<br>Tailos              |
| <b>Date</b><br>10/13/2024   | <b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Chen, Matthew<br><hr/> <b>Contributor address; City; State; Zip Code</b><br><br>Arlington, VA 22201                     | <b>Amount of Contribution (\$)</b><br><br>\$6.25            |
| <b>Principal occupation / Job title (See Instructions)</b><br>CPA                       |  | <b>Employer (See Instructions)</b><br>Self-employed         |
| <b>Date</b><br>10/03/2024   | <b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Chonle, Jeri<br><hr/> <b>Contributor address; City; State; Zip Code</b><br><br>Seattle, WA 98116                        | <b>Amount of Contribution (\$)</b><br><br>\$25.00           |
| <b>Principal occupation / Job title (See Instructions)</b><br>Not Employed              |  | <b>Employer (See Instructions)</b><br>Not Employed          |
| <b>Date</b><br>09/27/2024   | <b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Christian, Robert<br><hr/> <b>Contributor address; City; State; Zip Code</b><br><br>Quakertown, PA 18951                | <b>Amount of Contribution (\$)</b><br><br>\$50.00           |
| <b>Principal occupation / Job title (See Instructions)</b><br>Not Employed              |  | <b>Employer (See Instructions)</b><br>Not Employed          |
| <b>Date</b><br>10/07/2024   | <b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Cibulka, Daniel<br><hr/> <b>Contributor address; City; State; Zip Code</b><br><br>Minnetonka, MN 55343                  | <b>Amount of Contribution (\$)</b><br><br>\$1.00            |
| <b>Principal occupation / Job title (See Instructions)</b><br>Water Resource Specialist |  | <b>Employer (See Instructions)</b><br>Sherburbe SWCD        |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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|---|--|---|
| <b>The Instruction Guide explains how to complete this form.</b>                  |  | <b>1</b> Total pages Schedule A1:<br>Sch: 19/95 Rpt: 22/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian   |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/04/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Clark, Virginia | <b>7</b> Amount of Contribution (\$) \$250.00               |
| <b>6</b> Contributor address; City; State; Zip Code<br><br>Houston, TX 77005-1730 |  |   |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed      |  | <b>9</b> Employer (See Instructions)<br>Not Employed        |
| Date<br>10/03/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Clemons, Robert          | Amount of Contribution (\$) \$100.00                        |
| Contributor address; City; State; Zip Code<br><br>Waco, TX 76703                  |  |   |
| Principal occupation / Job title (See Instructions)<br>Education Consultant       |  | Employer (See Instructions)<br>Self                         |
| Date<br>10/10/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Cofrin, David            | Amount of Contribution (\$) \$100.00                        |
| Contributor address; City; State; Zip Code<br><br>Atlanta, GA 30306               |  |   |
| Principal occupation / Job title (See Instructions)<br>Retired                    |  | Employer (See Instructions)<br>Retired                      |
| Date<br>10/10/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Coleman, Garnet          | Amount of Contribution (\$) \$500.00                        |
| Contributor address; City; State; Zip Code<br><br>Houston, TX 77288               |  |   |
| Principal occupation / Job title (See Instructions)<br>Consultant                 |  | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/06/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Collins, Jennifer        | Amount of Contribution (\$) \$2.73                          |
| Contributor address; City; State; Zip Code<br><br>Wellesley, MA 02482             |  |   |
| Principal occupation / Job title (See Instructions)<br>Not Employed               |  | Employer (See Instructions)<br>Not Employed                 |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>      |  | 1 Total pages Schedule A1:<br>Sch: 20/95 Rpt: 23/157 |
| 2 FILER NAME<br>Carranza, Kristian                                    |  | 3 Filer ID (Ethics Commission Filers)<br>00087920    |
| 4 Date<br>10/16/2024  | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Collins, Jennifer | 7 Amount of Contribution (\$) \$6.25                 |
|   | 6 Contributor address; City; State; Zip Code<br><br>Wellesley, MA 02482                                |  |
| 8 Principal occupation / Job title (See Instructions)<br>Not Employed |  | 9 Employer (See Instructions)<br>Not Employed        |
| Date<br>10/04/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Cones, Marian       | Amount of Contribution (\$) \$500.00                 |
|   | Contributor address; City; State; Zip Code<br><br>Houston, TX 77055                                    |  |
| Principal occupation / Job title (See Instructions)<br>Retired        |  | Employer (See Instructions)<br>Retired               |
| Date<br>10/21/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Cox, Eddie          | Amount of Contribution (\$) \$100.00                 |
|   | Contributor address; City; State; Zip Code<br><br>Universal City, TX 78148                             |  |
| Principal occupation / Job title (See Instructions)<br>Not Employed   |  | Employer (See Instructions)<br>Not Employed          |
| Date<br>10/16/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Craven, Jessica     | Amount of Contribution (\$) \$20.00                  |
|   | Contributor address; City; State; Zip Code<br><br>Los Angeles, CA 90065                                |  |
| Principal occupation / Job title (See Instructions)<br>Organizer      |  | Employer (See Instructions)<br>Self                  |
| Date<br>10/06/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Crawford, Marshall  | Amount of Contribution (\$) \$10.00                  |
|   | Contributor address; City; State; Zip Code<br><br>Hot Springs, NC 28743                                |  |
| Principal occupation / Job title (See Instructions)<br>Merchant       |  | Employer (See Instructions)<br>Earth Guild           |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>            |   | <b>1</b> Total pages Schedule A1:<br>Sch: 21/95 Rpt: 24/157    |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                   |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920       |
| <b>4</b> Date<br>10/17/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Crawford, Marshall<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Hot Springs, NC 28743 | <b>7</b> Amount of Contribution (\$)<br><br>\$18.18            |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Merchant    |   | <b>9</b> Employer (See Instructions)<br>Earth Guild            |
| Date<br>10/17/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Cullen, Tom<br><hr/> Contributor address; City; State; Zip Code<br><br>Blue Point, NY 11715                           | Amount of Contribution (\$)<br><br>\$5.00                      |
| Principal occupation / Job title (See Instructions)<br>Clerk                |   | Employer (See Instructions)<br>USPS                            |
| Date<br>10/25/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Cummins, Thomas<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78249                      | Amount of Contribution (\$)<br><br>\$100.00                    |
| Principal occupation / Job title (See Instructions)<br>Union President      |   | Employer (See Instructions)<br>Bexar Co Federation of Teachers |
| Date<br>09/28/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Currie, Carlton<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77063                          | Amount of Contribution (\$)<br><br>\$100.00                    |
| Principal occupation / Job title (See Instructions)<br>Appraisal            |   | Employer (See Instructions)<br>Self                            |
| Date<br>10/16/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Czajkowski, Joseph<br><hr/> Contributor address; City; State; Zip Code<br><br>Phoenix, AZ 85004                       | Amount of Contribution (\$)<br><br>\$200.00                    |
| Principal occupation / Job title (See Instructions)<br>Development Director |   | Employer (See Instructions)<br>Democratic Mayors Association   |



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>    |  | 1 Total pages Schedule A1:<br>Sch: 22/95 Rpt: 25/157 |
| 2 FILER NAME<br>Carranza, Kristian                                  |  | 3 Filer ID (Ethics Commission Filers)<br>00087920    |
| 4 Date<br>10/01/2024  | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>DasGupta, Bhaskar | 7 Amount of Contribution (\$) \$5.00                 |
|   | 6 Contributor address; City; State; Zip Code<br><br>Chicago, IL 60607                                  |  |
| 8 Principal occupation / Job title (See Instructions)<br>Professor  |  | 9 Employer (See Instructions)<br>UIC                 |
| Date<br>10/12/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>DasGupta, Bhaskar   | Amount of Contribution (\$) \$6.00                   |
|   | Contributor address; City; State; Zip Code<br><br>Chicago, IL 60607                                    |  |
| Principal occupation / Job title (See Instructions)<br>Professor    |  | Employer (See Instructions)<br>UIC                   |
| Date<br>10/07/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Davis, HE           | Amount of Contribution (\$) \$20.00                  |
|   | Contributor address; City; State; Zip Code<br><br>Richmond, TX 77469                                   |  |
| Principal occupation / Job title (See Instructions)<br>Not Employed |  | Employer (See Instructions)<br>Not Employed          |
| Date<br>10/08/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Davis, Jennifer     | Amount of Contribution (\$) \$2.09                   |
|   | Contributor address; City; State; Zip Code<br><br>Austin, TX 78728                                     |  |
| Principal occupation / Job title (See Instructions)<br>Self         |  | Employer (See Instructions)<br>Pilgrimage            |
| Date<br>10/25/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Davis, Warren       | Amount of Contribution (\$) \$10.00                  |
|   | Contributor address; City; State; Zip Code<br><br>Troy, NH 03465                                       |  |
| Principal occupation / Job title (See Instructions)<br>Not Employed |  | Employer (See Instructions)<br>Not Employed          |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |  |   |
|--|--|---|
| <b>The Instruction Guide explains how to complete this form.</b>             |  | <b>1</b> Total pages Schedule A1:<br>Sch: 23/95 Rpt: 26/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                    |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/07/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Day, Edward R<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78210 | <b>7</b> Amount of Contribution (\$)<br><br>\$250.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed |  | <b>9</b> Employer (See Instructions)<br>Not Employed        |
| Date<br>10/06/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Delaney, Elizabeth L<br><hr/> Contributor address; City; State; Zip Code<br><br>Arlington, MA 02474              | Amount of Contribution (\$)<br><br>\$50.00                  |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |  | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/02/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Democracy Engine<br><hr/> Contributor address; City; State; Zip Code<br><br>Washington, DC 20001                 | Amount of Contribution (\$)<br><br>\$1,830.12               |
| Principal occupation / Job title (See Instructions)                          |  | Employer (See Instructions)                                 |
| Date<br>10/09/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Democracy Engine<br><hr/> Contributor address; City; State; Zip Code<br><br>Washington, DC 20001                 | Amount of Contribution (\$)<br><br>\$226.96                 |
| Principal occupation / Job title (See Instructions)                          |  | Employer (See Instructions)                                 |
| Date<br>10/16/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Democracy Engine<br><hr/> Contributor address; City; State; Zip Code<br><br>Washington, DC 20001                 | Amount of Contribution (\$)<br><br>\$333.45                 |
| Principal occupation / Job title (See Instructions)                          |  | Employer (See Instructions)                                 |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>              |  | <b>1</b> Total pages Schedule A1:<br>Sch: 24/95 Rpt: 27/157  |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                     |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920     |
| <b>4</b> Date<br>10/23/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Democracy Engine<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Washington, DC 20001 | <b>7</b> Amount of Contribution (\$)<br><br>\$228.96         |
| <b>8</b> Principal occupation / Job title (See Instructions)                  |  | <b>9</b> Employer (See Instructions)                         |
| Date<br>10/03/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>DerHagopian, Paul<br><hr/> Contributor address; City; State; Zip Code<br><br>Miami, FL 33155                       | Amount of Contribution (\$)<br><br>\$3.00                    |
| Principal occupation / Job title (See Instructions)<br>Benefits Administrator |  | Employer (See Instructions)<br>Serco NA                      |
| Date<br>10/02/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Devore, Michael<br><hr/> Contributor address; City; State; Zip Code<br><br>Naperville, IL 60540                    | Amount of Contribution (\$)<br><br>\$2.50                    |
| Principal occupation / Job title (See Instructions)<br>Not Employed           |  | Employer (See Instructions)<br>Not Employed                  |
| Date<br>10/23/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Devore, Michael<br><hr/> Contributor address; City; State; Zip Code<br><br>Naperville, IL 60540                    | Amount of Contribution (\$)<br><br>\$9.09                    |
| Principal occupation / Job title (See Instructions)<br>Not Employed           |  | Employer (See Instructions)<br>Not Employed                  |
| Date<br>10/14/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Diamond, Greg<br><hr/> Contributor address; City; State; Zip Code<br><br>Altadena, CA 91001-5539                   | Amount of Contribution (\$)<br><br>\$10.00                   |
| Principal occupation / Job title (See Instructions)<br>Salesman               |  | Employer (See Instructions)<br>Democratic Party of Wisconsin |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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|---|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>          |   | <b>1</b> Total pages Schedule A1:<br>Sch: 25/95 Rpt: 28/157     |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                 |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920        |
| <b>4</b> Date<br>10/26/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Diehl, D L Chris<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Mercer Island, WA 98040 | <b>7</b> Amount of Contribution (\$)<br><br>\$10.00             |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Physician |   | <b>9</b> Employer (See Instructions)<br>Group Health Permanente |
| Date<br>10/06/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Diiorio, Patrick<br><hr/> Contributor address; City; State; Zip Code<br><br>Katy, TX 77493                            | Amount of Contribution (\$)<br><br>\$50.00                      |
| Principal occupation / Job title (See Instructions)<br>Not Employed       |   | Employer (See Instructions)<br>Not Employed                     |
| Date<br>10/08/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Dikelsky, Alexander<br><hr/> Contributor address; City; State; Zip Code<br><br>Seattle, WA 98121                      | Amount of Contribution (\$)<br><br>\$1.16                       |
| Principal occupation / Job title (See Instructions)<br>Software Developer |   | Employer (See Instructions)<br>Bayer AG                         |
| Date<br>10/11/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Dilley, Douglas<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78210                      | Amount of Contribution (\$)<br><br>\$100.00                     |
| Principal occupation / Job title (See Instructions)<br>Attorney           |   | Employer (See Instructions)<br>Dilley Law Firm                  |
| Date<br>10/11/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Dockery, Debra<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78223                       | Amount of Contribution (\$)<br><br>\$99.00                      |
| Principal occupation / Job title (See Instructions)<br>Architect          |   | Employer (See Instructions)<br>Debra J Dockery Architect PC     |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>            |  | <b>1</b> Total pages Schedule A1:<br>Sch: 26/95 Rpt: 29/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                   |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/11/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Dominguez, Arturo<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Helotes, TX 78023 | <b>7</b> Amount of Contribution (\$)<br><br>\$20.00         |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Real Estate |  | <b>9</b> Employer (See Instructions)<br>Self                |
| Date<br>10/18/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Dovalina, Neifa<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78216                 | Amount of Contribution (\$)<br><br>\$25.00                  |
| Principal occupation / Job title (See Instructions)<br>Not Employed         |  | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/16/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Dunn, Marc<br><hr/> Contributor address; City; State; Zip Code<br><br>Cooper City, FL 33026                      | Amount of Contribution (\$)<br><br>\$50.00                  |
| Principal occupation / Job title (See Instructions)<br>Not Employed         |  | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/16/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Eggers, Sarah<br><hr/> Contributor address; City; State; Zip Code<br><br>Pasadena, CA 91101                      | Amount of Contribution (\$)<br><br>\$40.00                  |
| Principal occupation / Job title (See Instructions)<br>Therapist            |  | Employer (See Instructions)<br>Self                         |
| Date<br>10/03/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Escareno, Louis<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78207                 | Amount of Contribution (\$)<br><br>\$100.00                 |
| Principal occupation / Job title (See Instructions)<br>Attorney             |  | Employer (See Instructions)<br>Self Employed                |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>               |   | <b>1</b> Total pages Schedule A1:<br>Sch: 27/95 Rpt: 30/157   |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                      |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920      |
| <b>4</b> Date<br>10/13/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Escobedo, Mary<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78210 | <b>7</b> Amount of Contribution (\$)<br><br>\$200.00          |
| <b>8</b> Principal occupation / Job title (See Instructions)                   |   | <b>9</b> Employer (See Instructions)                          |
| Date<br>10/15/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Eskridge, Nancy<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78745                       | Amount of Contribution (\$)<br><br>\$100.00                   |
| Principal occupation / Job title (See Instructions)<br>Not Employed            |   | Employer (See Instructions)<br>Not Employed                   |
| Date<br>10/02/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Estes, Amy<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78704                            | Amount of Contribution (\$)<br><br>\$50.00                    |
| Principal occupation / Job title (See Instructions)<br>Admin                   |   | Employer (See Instructions)<br>UTSA                           |
| Date<br>10/09/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Evbagharu, Odus<br><hr/> Contributor address; City; State; Zip Code<br><br>Katy, TX 77449                         | Amount of Contribution (\$)<br><br>\$150.00                   |
| Principal occupation / Job title (See Instructions)<br>Communications Director |   | Employer (See Instructions)<br>Harris County Democratic Party |
| Date<br>10/12/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Faust, Susan<br><hr/> Contributor address; City; State; Zip Code<br><br>Bellaire, TX 77401                        | Amount of Contribution (\$)<br><br>\$100.00                   |
| Principal occupation / Job title (See Instructions)<br>Not Employed            |   | Employer (See Instructions)<br>None                           |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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|---|--|---|
| <b>The Instruction Guide explains how to complete this form.</b>        |  | <b>1</b> Total pages Schedule A1:<br>Sch: 28/95 Rpt: 31/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                               |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/10/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Fine, Mary Ellen<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78745 | <b>7</b> Amount of Contribution (\$)<br><br>\$4.16          |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Retired |  | <b>9</b> Employer (See Instructions)<br>None                |
| Date<br>10/18/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Florek, Julia<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77030                     | Amount of Contribution (\$)<br><br>\$10.00                  |
| Principal occupation / Job title (See Instructions)<br>Teacher          |  | Employer (See Instructions)<br>CCISD                        |
| Date<br>10/13/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Flores, Juan<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78250                  | Amount of Contribution (\$)<br><br>\$25.00                  |
| Principal occupation / Job title (See Instructions)<br>Not Employed     |  | Employer (See Instructions)<br>Not Employed                 |
| Date<br>09/29/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Fowles, Nicole<br><hr/> Contributor address; City; State; Zip Code<br><br>Helotes, TX 78023                    | Amount of Contribution (\$)<br><br>\$25.00                  |
| Principal occupation / Job title (See Instructions)<br>Manager          |  | Employer (See Instructions)<br>City                         |
| Date<br>10/02/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Foxhall, Irene<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77006                    | Amount of Contribution (\$)<br><br>\$500.00                 |
| Principal occupation / Job title (See Instructions)<br>Not Employed     |  | Employer (See Instructions)<br>Not Employed                 |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>             |  | <b>1</b> Total pages Schedule A1:<br>Sch: 29/95 Rpt: 32/157       |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                    |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920          |
| <b>4</b> Date<br>09/27/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Foxvog, Mark<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Round Lake, IL 60073 | <b>7</b> Amount of Contribution (\$)<br><br>\$101.88              |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed |  | <b>9</b> Employer (See Instructions)<br>Not Employed              |
| Date<br>10/20/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Fujii, Gary<br><hr/> Contributor address; City; State; Zip Code<br><br>Holualoa, HI 96725                      | Amount of Contribution (\$)<br><br>\$25.00                        |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |  | Employer (See Instructions)<br>Not Employed                       |
| Date<br>10/13/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Fumat, Xavier<br><hr/> Contributor address; City; State; Zip Code<br><br>Los Angeles, CA 90042                 | Amount of Contribution (\$)<br><br>\$5.00                         |
| Principal occupation / Job title (See Instructions)<br>Printer               |  | Employer (See Instructions)<br>Gemini GEL                         |
| Date<br>10/08/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Gaarder, Kirsten<br><hr/> Contributor address; City; State; Zip Code<br><br>Modesto, CA 95356                  | Amount of Contribution (\$)<br><br>\$2.50                         |
| Principal occupation / Job title (See Instructions)<br>Physician             |  | Employer (See Instructions)<br>Modesto Radiological Medical Group |
| Date<br>10/06/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Galvan, Eva<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78229                   | Amount of Contribution (\$)<br><br>\$25.00                        |
| Principal occupation / Job title (See Instructions)<br>Physician             |  | Employer (See Instructions)<br>UT Health San Antonio              |



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>                     |  | <b>1</b> Total pages Schedule A1:<br>Sch: 30/95 Rpt: 33/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian  |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/10/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Garay, Monica<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Silver Spring, MD 20910 | <b>7</b> Amount of Contribution (\$)<br><br>\$26.00         |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Legislative Director |  | <b>9</b> Employer (See Instructions)<br>Congress            |
| Date<br>10/10/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Garcia, Jesse<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78240                     | Amount of Contribution (\$)<br><br>\$50.00                  |
| Principal occupation / Job title (See Instructions)<br>Insurance Broker              |  | Employer (See Instructions)<br>Jesse P Garcia               |
| Date<br>10/06/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Genecov, Lisa<br><hr/> Contributor address; City; State; Zip Code<br><br>Dallas, TX 75229                          | Amount of Contribution (\$)<br><br>\$100.00                 |
| Principal occupation / Job title (See Instructions)<br>Not Employed                  |  | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/17/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Geppert, Lance<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78232                    | Amount of Contribution (\$)<br><br>\$25.00                  |
| Principal occupation / Job title (See Instructions)<br>Attorney                      |  | Employer (See Instructions)<br>Self                         |
| Date<br>09/28/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Geretz, Elizabeth<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77098                     | Amount of Contribution (\$)<br><br>\$50.00                  |
| Principal occupation / Job title (See Instructions)<br>Project Manager               |  | Employer (See Instructions)<br>Harris County Precinct 4     |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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|---|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>                |   | <b>1</b> Total pages Schedule A1:<br>Sch: 31/95 Rpt: 34/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                       |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/24/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Giffords PAC | <b>7</b> Amount of Contribution (\$)<br><br>\$1,000.00      |
| <b>6</b> Contributor address; City; State; Zip Code<br><br>Washington, DC 20091 |   |   |
| <b>8</b> Principal occupation / Job title (See Instructions)                    |   | <b>9</b> Employer (See Instructions)                        |
| Date<br>10/25/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Gilbert, Mary         | Amount of Contribution (\$)<br><br>\$3.00                   |
| Contributor address; City; State; Zip Code<br><br>Sonoma, CA 95476              |   |   |
| Principal occupation / Job title (See Instructions)<br>Not Employed             |   | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/06/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Gillespie, wardell    | Amount of Contribution (\$)<br><br>\$50.00                  |
| Contributor address; City; State; Zip Code<br><br>Schertz, TX 78154             |   |   |
| Principal occupation / Job title (See Instructions)<br>Not Employed             |   | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/15/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Glassner, Sharon      | Amount of Contribution (\$)<br><br>\$3.00                   |
| Contributor address; City; State; Zip Code<br><br>Morton Grove, IL 60053        |   |   |
| Principal occupation / Job title (See Instructions)<br>Not Employed             |   | Employer (See Instructions)<br>None                         |
| Date<br>10/09/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Godfrey, Justin       | Amount of Contribution (\$)<br><br>\$50.00                  |
| Contributor address; City; State; Zip Code<br><br>Austin, TX 78721              |   |   |
| Principal occupation / Job title (See Instructions)<br>Vice President/Treasurer |   | Employer (See Instructions)<br>Barilla Management Inc       |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>             |  | <b>1</b> Total pages Schedule A1:<br>Sch: 32/95 Rpt: 35/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                    |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/06/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Goerner, Jon<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Dallas, TX 75205 | <b>7</b> Amount of Contribution (\$)<br><br>\$10.00         |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed |  | <b>9</b> Employer (See Instructions)<br>Not Employed        |
| Date<br>09/28/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Goldman, Peter<br><hr/> Contributor address; City; State; Zip Code<br><br>Portland, ME 04101               | Amount of Contribution (\$)<br><br>\$5.00                   |
| Principal occupation / Job title (See Instructions)<br>Attorney              |  | Employer (See Instructions)<br>Self                         |
| Date<br>10/16/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Gomez, Eric<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78223               | Amount of Contribution (\$)<br><br>\$20.00                  |
| Principal occupation / Job title (See Instructions)<br>Router                |  | Employer (See Instructions)<br>Saferide Health              |
| Date<br>10/10/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Gonzalez, Charles<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78212         | Amount of Contribution (\$)<br><br>\$150.00                 |
| Principal occupation / Job title (See Instructions)<br>Attorney              |  | Employer (See Instructions)<br>Ogletree Deakins P.C.        |
| Date<br>10/16/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Gonzalez Falla, Celso<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78205     | Amount of Contribution (\$)<br><br>\$250.00                 |
| Principal occupation / Job title (See Instructions)<br>Attorney              |  | Employer (See Instructions)<br>Self                         |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>             |  | <b>1</b> Total pages Schedule A1:<br>Sch: 33/95 Rpt: 36/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                    |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/08/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Goodman, John | <b>7</b> Amount of Contribution (\$) \$100.00               |
| <b>6</b> Contributor address; City; State; Zip Code<br><br>Houston, TX 77084 |  |   |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed |  | <b>9</b> Employer (See Instructions)<br>Not Employed        |
| Date<br>10/17/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Goodman, John          | Amount of Contribution (\$) \$150.00                        |
| Contributor address; City; State; Zip Code<br><br>Houston, TX 77084          |  |   |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |  | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/25/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Green Wave PAC         | Amount of Contribution (\$) \$100.00                        |
| Contributor address; City; State; Zip Code<br><br>Taylor, TX 76574           |  |   |
| Principal occupation / Job title (See Instructions)                          |  | Employer (See Instructions)                                 |
| Date<br>09/30/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Grissom, Shelli        | Amount of Contribution (\$) \$10.00                         |
| Contributor address; City; State; Zip Code<br><br>Austin, TX 78704           |  |   |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |  | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/16/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Grodd, Kate            | Amount of Contribution (\$) \$5.00                          |
| Contributor address; City; State; Zip Code<br><br>Los Angeles, CA 90027      |  |   |
| Principal occupation / Job title (See Instructions)<br>Content Creator       |  | Employer (See Instructions)<br>Freelance                    |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>         |   | <b>1</b> Total pages Schedule A1:<br>Sch: 34/95 Rpt: 37/157             |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920                |
| <b>4</b> Date<br>09/27/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Gross, Ellen<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>San Diego, CA 92110 | <b>7</b> Amount of Contribution (\$)<br><br>\$100.00                    |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Attorney |   | <b>9</b> Employer (See Instructions)<br>San Diego Unified Port District |
| Date<br>09/27/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Guthrie, Clayton<br><hr/> Contributor address; City; State; Zip Code<br><br>New York, NY 10003                | Amount of Contribution (\$)<br><br>\$25.00                              |
| Principal occupation / Job title (See Instructions)<br>Psychologist      |   | Employer (See Instructions)<br>Self Employed                            |
| Date<br>10/05/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Halff, Danna<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78209                 | Amount of Contribution (\$)<br><br>\$50.00                              |
| Principal occupation / Job title (See Instructions)<br>Legislative Aide  |   | Employer (See Instructions)<br>State of Texas                           |
| Date<br>09/29/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hamby, John<br><hr/> Contributor address; City; State; Zip Code<br><br>Pompano Beach, FL 33062                | Amount of Contribution (\$)<br><br>\$3.00                               |
| Principal occupation / Job title (See Instructions)<br>Retired           |   | Employer (See Instructions)<br>None                                     |
| Date<br>10/02/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hansen, Paul<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78727-6870                 | Amount of Contribution (\$)<br><br>\$10.00                              |
| Principal occupation / Job title (See Instructions)<br>Software Engineer |   | Employer (See Instructions)<br>National Instruments                     |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>              |  | <b>1</b> Total pages Schedule A1:<br>Sch: 35/95 Rpt: 38/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                     |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/06/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hare, Stacie<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>New York, NY 10025 | <b>7</b> Amount of Contribution (\$)<br><br>\$50.00         |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Social Worker |  | <b>9</b> Employer (See Instructions)<br>Share Our Strength  |
| Date<br>09/30/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Harper, Chris<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78247               | Amount of Contribution (\$)<br><br>\$25.00                  |
| Principal occupation / Job title (See Instructions)<br>Not Employed           |  | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/13/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Harper, Chris<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78247               | Amount of Contribution (\$)<br><br>\$25.00                  |
| Principal occupation / Job title (See Instructions)<br>Not Employed           |  | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/17/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hartfield, Edward<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78210           | Amount of Contribution (\$)<br><br>\$5.00                   |
| Principal occupation / Job title (See Instructions)<br>Not Employed           |  | Employer (See Instructions)<br>None                         |
| Date<br>10/06/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hartung, Stephen<br><hr/> Contributor address; City; State; Zip Code<br><br>Deer Park, TX 77536              | Amount of Contribution (\$)<br><br>\$120.00                 |
| Principal occupation / Job title (See Instructions)<br>Not Employed           |  | Employer (See Instructions)<br>Not Employed                 |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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|---|--|---|
| <b>The Instruction Guide explains how to complete this form.</b>        |  | <b>1</b> Total pages Schedule A1:<br>Sch: 36/95 Rpt: 39/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                               |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/13/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hartzell, Eric<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78722 | <b>7</b> Amount of Contribution (\$)<br><br>\$30.00         |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Planner |  | <b>9</b> Employer (See Instructions)<br>Grantworks          |
| Date<br>10/12/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Heeg, Alice<br><hr/> Contributor address; City; State; Zip Code<br><br>Schertz, TX 78154                     | Amount of Contribution (\$)<br><br>\$50.00                  |
| Principal occupation / Job title (See Instructions)<br>Retired          |  | Employer (See Instructions)<br>Self                         |
| Date<br>10/12/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Heeg, Alice<br><hr/> Contributor address; City; State; Zip Code<br><br>Schertz, TX 78154                     | Amount of Contribution (\$)<br><br>\$100.00                 |
| Principal occupation / Job title (See Instructions)<br>Retired          |  | Employer (See Instructions)<br>Self                         |
| Date<br>09/28/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Helfrich, Joseph<br><hr/> Contributor address; City; State; Zip Code<br><br>Brunswick, ME 04011              | Amount of Contribution (\$)<br><br>\$25.00                  |
| Principal occupation / Job title (See Instructions)<br>Not Employed     |  | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/18/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hemenway, Mark<br><hr/> Contributor address; City; State; Zip Code<br><br>Charlotte, NC 28210                | Amount of Contribution (\$)<br><br>\$25.00                  |
| Principal occupation / Job title (See Instructions)<br>Paralegal        |  | Employer (See Instructions)<br>Geoffrey C. Hemenway         |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>                                    |   | <b>1</b> Total pages Schedule A1:<br>Sch: 37/95 Rpt: 40/157        |
| <b>2</b> FILER NAME<br>Carranza, Kristian   |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920           |
| <b>4</b> Date<br>10/08/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hernandez, Irene<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78260 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00                |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Mngr                                |   | <b>9</b> Employer (See Instructions)<br>BCDP                       |
| <b>Date</b><br>09/28/2024   | <b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hernandez, Jacob<br><hr/> <b>Contributor address; City; State; Zip Code</b><br><br>San Antonio, TX 78254     | <b>Amount of Contribution (\$)</b><br><br>\$5.00                   |
| <b>Principal occupation / Job title (See Instructions)</b><br>Advocacy and Public Health Specialist |   | <b>Employer (See Instructions)</b><br>Bexar County Medical Society |
| <b>Date</b><br>09/30/2024   | <b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hernandez, Patricia<br><hr/> <b>Contributor address; City; State; Zip Code</b><br><br>Live Oak, TX 78233     | <b>Amount of Contribution (\$)</b><br><br>\$10.00                  |
| <b>Principal occupation / Job title (See Instructions)</b><br>Retired                               |   | <b>Employer (See Instructions)</b><br>Retired                      |
| <b>Date</b><br>09/30/2024   | <b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Herr, Scott<br><hr/> <b>Contributor address; City; State; Zip Code</b><br><br>Marco Island, FL 34145         | <b>Amount of Contribution (\$)</b><br><br>\$15.00                  |
| <b>Principal occupation / Job title (See Instructions)</b><br>Not Employed                          |   | <b>Employer (See Instructions)</b><br>Not Employed                 |
| <b>Date</b><br>10/24/2024   | <b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Herre, Edward<br><hr/> <b>Contributor address; City; State; Zip Code</b><br><br>New Orleans, LA 70118        | <b>Amount of Contribution (\$)</b><br><br>\$5.00                   |
| <b>Principal occupation / Job title (See Instructions)</b><br>Retired                               |   | <b>Employer (See Instructions)</b><br>Retired                      |



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |   |   |
|---|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>          |   | <b>1</b> Total pages Schedule A1:<br>Sch: 38/95 Rpt: 41/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                 |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/03/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Herrin, Rebecca<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Dallas, TX 75211 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00         |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Marketing |   | <b>9</b> Employer (See Instructions)<br>Thryv               |
| Date<br>10/23/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Herrmann, Brandon<br><hr/> Contributor address; City; State; Zip Code<br><br>Dallas, TX 75214                 | Amount of Contribution (\$)<br><br>\$10.00                  |
| Principal occupation / Job title (See Instructions)<br>Accounting         |   | Employer (See Instructions)<br>Self                         |
| Date<br>10/13/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hess, Myron<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78704                       | Amount of Contribution (\$)<br><br>\$100.00                 |
| Principal occupation / Job title (See Instructions)<br>Attorney           |   | Employer (See Instructions)<br>Law Office of Myron Hess     |
| Date<br>10/18/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hildreth, Daniel<br><hr/> Contributor address; City; State; Zip Code<br><br>Falmouth, ME 04105                | Amount of Contribution (\$)<br><br>\$1,000.00               |
| Principal occupation / Job title (See Instructions)<br>Not Employed       |   | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/11/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hill, Hubert (Tom)<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78258           | Amount of Contribution (\$)<br><br>\$5.00                   |
| Principal occupation / Job title (See Instructions)<br>Not Employed       |   | Employer (See Instructions)<br>Not Employed                 |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>             |  | <b>1</b> Total pages Schedule A1:<br>Sch: 39/95 Rpt: 42/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                    |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/10/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hirsch, Margaret<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Dallas, TX 75209 | <b>7</b> Amount of Contribution (\$)<br><br>\$1,000.00      |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed |  | <b>9</b> Employer (See Instructions)<br>Not Employed        |
| Date<br>10/23/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hisssam, Timothy<br><hr/> Contributor address; City; State; Zip Code<br><br>Pflugerville, TX 78660             | Amount of Contribution (\$)<br><br>\$14.00                  |
| Principal occupation / Job title (See Instructions)<br>Tax Examining Tech    |  | Employer (See Instructions)<br>IRS                          |
| Date<br>10/04/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hoang, Kim Ngan<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78744                    | Amount of Contribution (\$)<br><br>\$10.00                  |
| Principal occupation / Job title (See Instructions)<br>Self-employed         |  | Employer (See Instructions)<br>Ngan Hoang                   |
| Date<br>09/30/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hollenshead, Todd<br><hr/> Contributor address; City; State; Zip Code<br><br>Benton, LA 71006                  | Amount of Contribution (\$)<br><br>\$5.00                   |
| Principal occupation / Job title (See Instructions)<br>Farmer                |  | Employer (See Instructions)<br>Self                         |
| Date<br>10/07/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hollenshead, Todd<br><hr/> Contributor address; City; State; Zip Code<br><br>Benton, LA 71006                  | Amount of Contribution (\$)<br><br>\$25.00                  |
| Principal occupation / Job title (See Instructions)<br>Farmer                |  | Employer (See Instructions)<br>Self                         |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>          |  | <b>1</b> Total pages Schedule A1:<br>Sch: 40/95 Rpt: 43/157          |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                 |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920             |
| <b>4</b> Date<br>09/28/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hooper, Mark<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Fredericksburg, TX 78624 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00                  |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>President |  | <b>9</b> Employer (See Instructions)<br>CrystallinePhoenix           |
| Date<br>10/09/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Howard, Robert<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78704                         | Amount of Contribution (\$)<br><br>\$100.00                          |
| Principal occupation / Job title (See Instructions)<br>Consultant         |  | Employer (See Instructions)<br>Robert M. Howard Inc                  |
| Date<br>10/08/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hull, Megan<br><hr/> Contributor address; City; State; Zip Code<br><br>Washington, DC 20007                        | Amount of Contribution (\$)<br><br>\$250.00                          |
| Principal occupation / Job title (See Instructions)<br>Activist           |  | Employer (See Instructions)<br>Self                                  |
| Date<br>10/03/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Ingle, Margaret<br><hr/> Contributor address; City; State; Zip Code<br><br>Greensboro, NC 27408                    | Amount of Contribution (\$)<br><br>\$20.00                           |
| Principal occupation / Job title (See Instructions)<br>Not Employed       |  | Employer (See Instructions)<br>Not Employed                          |
| Date<br>10/09/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Ireland, Kiel<br><hr/> Contributor address; City; State; Zip Code<br><br>Pasadena, CA 91106                        | Amount of Contribution (\$)<br><br>\$16.66                           |
| Principal occupation / Job title (See Instructions)<br>Lawyer             |  | Employer (See Instructions)<br>Quinn Emanuel Urquhart & Sullivan LLP |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>                  |  | <b>1</b> Total pages Schedule A1:<br>Sch: 41/95 Rpt: 44/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian   |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/02/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Iskow, Lawrence | <b>7</b> Amount of Contribution (\$)<br><br>\$5.00          |
| <b>6</b> Contributor address; City; State; Zip Code<br><br>Gaithersburg, MD 20878 |  |   |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed      |  | <b>9</b> Employer (See Instructions)<br>Not Employed        |
| Date<br>10/19/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Izzo, Nunzio             | Amount of Contribution (\$)<br><br>\$5.00                   |
| Contributor address; City; State; Zip Code<br><br>Hoboken, NJ 07030               |  |   |
| Principal occupation / Job title (See Instructions)<br>Not Employed               |  | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/11/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>JOHNSON, JAMES           | Amount of Contribution (\$)<br><br>\$50.00                  |
| Contributor address; City; State; Zip Code<br><br>Dallas, TX 75218                |  |   |
| Principal occupation / Job title (See Instructions)<br>Attorney                   |  | Employer (See Instructions)<br>Self                         |
| Date<br>10/18/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Jackson, Kevin           | Amount of Contribution (\$)<br><br>\$50.00                  |
| Contributor address; City; State; Zip Code<br><br>Austin, TX 78749                |  |   |
| Principal occupation / Job title (See Instructions)<br>Educational Diagnostician  |  | Employer (See Instructions)<br>Del Valle ISD                |
| Date<br>10/17/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Jaklitsch, Brian         | Amount of Contribution (\$)<br><br>\$4.54                   |
| Contributor address; City; State; Zip Code<br><br>Sayville, NY 11782              |  |   |
| Principal occupation / Job title (See Instructions)<br>Vice President             |  | Employer (See Instructions)<br>J Roderick Public Relations  |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>           |  | <b>1</b> Total pages Schedule A1:<br>Sch: 42/95 Rpt: 45/157    |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                  |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920       |
| <b>4</b> Date<br>09/28/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Janani, Maryam<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Washington, DC 20010 | <b>7</b> Amount of Contribution (\$)<br><br>\$100.00           |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Government |  | <b>9</b> Employer (See Instructions)<br>Department of Commerce |
| Date<br>09/28/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Jasso, Alonso<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78254                   | Amount of Contribution (\$)<br><br>\$25.00                     |
| Principal occupation / Job title (See Instructions)<br>Not Employed        |  | Employer (See Instructions)<br>Not Employed                    |
| Date<br>10/17/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Jaworski, Joseph<br><hr/> Contributor address; City; State; Zip Code<br><br>Galveston, TX 77550                  | Amount of Contribution (\$)<br><br>\$500.00                    |
| Principal occupation / Job title (See Instructions)<br>Attorney            |  | Employer (See Instructions)<br>Joseph S Jaworski PC            |
| Date<br>10/22/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Johns, Pat<br><hr/> Contributor address; City; State; Zip Code<br><br>Tampa, FL 33626                            | Amount of Contribution (\$)<br><br>\$100.00                    |
| Principal occupation / Job title (See Instructions)<br>Not Employed        |  | Employer (See Instructions)<br>Not Employed                    |
| Date<br>10/02/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Johnson, Jack<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78212-3113              | Amount of Contribution (\$)<br><br>\$100.00                    |
| Principal occupation / Job title (See Instructions)<br>CAO                 |  | Employer (See Instructions)<br>Destinations International      |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>                     |  | <b>1</b> Total pages Schedule A1:<br>Sch: 43/95 Rpt: 46/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian  |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/13/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Johnson, Ray             | <b>7</b> Amount of Contribution (\$) \$50.00                |
| <b>6</b> Contributor address; City; State; Zip Code<br><br>West Des Moines, IA 50265 |  |   |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Attorney             |  | <b>9</b> Employer (See Instructions)<br>Johnson Law Firm    |
| Date<br>10/08/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Johnston, Benjamin                | Amount of Contribution (\$) \$20.83                         |
| Contributor address; City; State; Zip Code<br><br>Austin, TX 78705                   |  |   |
| Principal occupation / Job title (See Instructions)<br>Librarian                     |  | Employer (See Instructions)<br>Austin Community College     |
| Date<br>10/03/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Jones, Jesse                      | Amount of Contribution (\$) \$100.00                        |
| Contributor address; City; State; Zip Code<br><br>Houston, TX 77019-6424             |  |   |
| Principal occupation / Job title (See Instructions)<br>Not Employed                  |  | Employer (See Instructions)<br>Not Employed                 |
| Date<br>09/28/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Jones, Timothy                    | Amount of Contribution (\$) \$25.00                         |
| Contributor address; City; State; Zip Code<br><br>Albany, NY 12205-1004              |  |   |
| Principal occupation / Job title (See Instructions)<br>Not Employed                  |  | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/04/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Justin R. Rodriguez Campaign Fund | Amount of Contribution (\$) \$1,000.00                      |
| Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78201              |  |   |
| Principal occupation / Job title (See Instructions)                                  |  | Employer (See Instructions)                                 |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>             |   | <b>1</b> Total pages Schedule A1:<br>Sch: 44/95 Rpt: 47/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                    |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/07/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>K, A<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Villanova, PA 19085 | <b>7</b> Amount of Contribution (\$)<br><br>\$2.27          |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed |   | <b>9</b> Employer (See Instructions)<br>Not Employed        |
| Date<br>10/08/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Katz, Farley<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78209         | Amount of Contribution (\$)<br><br>\$100.00                 |
| Principal occupation / Job title (See Instructions)<br>attorney              |   | Employer (See Instructions)<br>Clark Hill                   |
| Date<br>10/14/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Kauffman, Albert<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78201     | Amount of Contribution (\$)<br><br>\$50.00                  |
| Principal occupation / Job title (See Instructions)<br>Professor             |   | Employer (See Instructions)<br>St. Mary University          |
| Date<br>10/03/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Keefer, Timothy<br><hr/> Contributor address; City; State; Zip Code<br><br>Middlebrook, VA 24459      | Amount of Contribution (\$)<br><br>\$5.00                   |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |   | Employer (See Instructions)<br>Not Employed                 |
| Date<br>09/30/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Kennard, Karen<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78703            | Amount of Contribution (\$)<br><br>\$250.00                 |
| Principal occupation / Job title (See Instructions)<br>Attorney              |   | Employer (See Instructions)<br>Greenberg Traurig LLP        |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>                  |  | <b>1</b> Total pages Schedule A1:<br>Sch: 45/95 Rpt: 48/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian   |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/04/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Kile, Winston | <b>7</b> Amount of Contribution (\$)<br><br>\$100.00        |
| <b>6</b> Contributor address; City; State; Zip Code<br><br>Houston, TX 77096-1320 |  |   |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed      |  | <b>9</b> Employer (See Instructions)<br>Not Employed        |
| Date<br>10/07/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>King, Brian            | Amount of Contribution (\$)<br><br>\$222.00                 |
| Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78209           |  |   |
| Principal occupation / Job title (See Instructions)<br>IT                         |  | Employer (See Instructions)<br>Rackspace Hosting            |
| Date<br>10/19/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>King, Brooke           | Amount of Contribution (\$)<br><br>\$25.00                  |
| Contributor address; City; State; Zip Code<br><br>Humble, TX 77346                |  |   |
| Principal occupation / Job title (See Instructions)<br>Photographer               |  | Employer (See Instructions)<br>Brooke King                  |
| Date<br>10/25/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>King, Gareth           | Amount of Contribution (\$)<br><br>\$1.00                   |
| Contributor address; City; State; Zip Code<br><br>New York, NY 10040              |  |   |
| Principal occupation / Job title (See Instructions)<br>Environmental Engineer     |  | Employer (See Instructions)<br>NYC DEP                      |
| Date<br>09/30/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>King, Joseph           | Amount of Contribution (\$)<br><br>\$10.00                  |
| Contributor address; City; State; Zip Code<br><br>Glen Flora, TX 77443            |  |   |
| Principal occupation / Job title (See Instructions)<br>Retired                    |  | Employer (See Instructions)<br>None                         |



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>             |   | <b>1</b> Total pages Schedule A1:<br>Sch: 46/95 Rpt: 49/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                    |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/20/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Kipley, Marlene<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Quincy, IL 62301 | <b>7</b> Amount of Contribution (\$)<br><br>\$15.00         |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed |   | <b>9</b> Employer (See Instructions)<br>Not Employed        |
| Date<br>10/13/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Kitchen`, Sara<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78756                    | Amount of Contribution (\$)<br><br>\$4.16                   |
| Principal occupation / Job title (See Instructions)<br>Consultant            |   | Employer (See Instructions)<br>TSBVI                        |
| Date<br>09/27/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Kittle, Kathleen<br><hr/> Contributor address; City; State; Zip Code<br><br>Carrollton, TX 75010              | Amount of Contribution (\$)<br><br>\$20.00                  |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |   | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/17/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Kling, Kelsey<br><hr/> Contributor address; City; State; Zip Code<br><br>Dripping Springs, TX 78620           | Amount of Contribution (\$)<br><br>\$25.00                  |
| Principal occupation / Job title (See Instructions)<br>Lobbyist              |   | Employer (See Instructions)<br>Texas AFT                    |
| Date<br>09/28/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Knittel, Philip<br><hr/> Contributor address; City; State; Zip Code<br><br>Lord's Valley, PA 18428            | Amount of Contribution (\$)<br><br>\$100.00                 |
| Principal occupation / Job title (See Instructions)<br>Advertising           |   | Employer (See Instructions)<br>Unified                      |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |   |  |
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| <b>The Instruction Guide explains how to complete this form.</b>           |   | 1 Total pages Schedule A1:<br>Sch: 47/95 Rpt: 50/157 |
| 2 FILER NAME<br>Carranza, Kristian   |   | 3 Filer ID (Ethics Commission Filers)<br>00087920    |
| 4 Date<br>09/28/2024   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Koprince, Karen     | 7 Amount of Contribution (\$) \$100.00               |
|  | 6 Contributor address; City; State; Zip Code<br><br>DPO, AE 09283   |  |
| 8 Principal occupation / Job title (See Instructions)<br>Health Officer    |   | 9 Employer (See Instructions)<br>USAID               |
| Date<br>09/27/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Kosobud, Terry        | Amount of Contribution (\$) \$100.00                 |
|  | Contributor address; City; State; Zip Code<br><br>Austin, TX 78749  |  |
| Principal occupation / Job title (See Instructions)<br>Not Employed        |   | Employer (See Instructions)<br>Not Employed          |
| Date<br>09/28/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Krolosky, Lorraine    | Amount of Contribution (\$) \$15.00                  |
|  | Contributor address; City; State; Zip Code<br><br>Sioux Falls, SD 57104                                   |  |
| Principal occupation / Job title (See Instructions)<br>Truck Driver        |   | Employer (See Instructions)<br>Self                  |
| Date<br>10/17/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Kuniavsky, Mike       | Amount of Contribution (\$) \$1.25                   |
|  | Contributor address; City; State; Zip Code<br><br>San Francisco, CA 94103                                 |  |
| Principal occupation / Job title (See Instructions)<br>Researcher          |   | Employer (See Instructions)<br>Accenture             |
| Date<br>10/04/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Kurumbur, Karthikeyan | Amount of Contribution (\$) \$10.00                  |
|  | Contributor address; City; State; Zip Code<br><br>Spring, TX 77379  |  |
| Principal occupation / Job title (See Instructions)<br>Mechanical Engineer |   | Employer (See Instructions)<br>Proplant Inc          |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>             |   | <b>1</b> Total pages Schedule A1:<br>Sch: 48/95 Rpt: 51/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                    |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/11/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>L Gold, Dean<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Baltimore, MD 21230 | <b>7</b> Amount of Contribution (\$)<br><br>\$1.25          |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed |   | <b>9</b> Employer (See Instructions)<br>Not Employed        |
| Date<br>10/20/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Lackritz, Judy<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78209               | Amount of Contribution (\$)<br><br>\$50.00                  |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |   | Employer (See Instructions)<br>Not Employed                 |
| Date<br>09/28/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Laine, Marsha<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78745                     | Amount of Contribution (\$)<br><br>\$1.00                   |
| Principal occupation / Job title (See Instructions)<br>Online Sales          |   | Employer (See Instructions)<br>Marsha Laine                 |
| Date<br>10/10/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Lamb, Benjamin<br><hr/> Contributor address; City; State; Zip Code<br><br>Cambridge, MA 02140                 | Amount of Contribution (\$)<br><br>\$25.00                  |
| Principal occupation / Job title (See Instructions)<br>Research Analyst      |   | Employer (See Instructions)<br>Harvard University           |
| Date<br>10/04/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Lane, Neel<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78210                   | Amount of Contribution (\$)<br><br>\$100.00                 |
| Principal occupation / Job title (See Instructions)<br>Attorney              |   | Employer (See Instructions)<br>Norton Rose Fulbright LLP    |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>             |   | <b>1</b> Total pages Schedule A1:<br>Sch: 49/95 Rpt: 52/157  |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                    |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920     |
| <b>4</b> Date<br>10/21/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Langerman, Jessica<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Chevy Chase, MD 20815     | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00          |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed |   | <b>9</b> Employer (See Instructions)<br>Not Employed         |
| Date<br>10/18/2024   | Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00562777</u> )<br>Latino Victory Fund<br><hr/> Contributor address; City; State; Zip Code<br><br>Washington, DC 20043 | Amount of Contribution (\$)<br><br>\$1,000.00                |
| Principal occupation / Job title (See Instructions)                          |   | Employer (See Instructions)                                  |
| Date<br>10/17/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Lau, Roger<br><hr/> Contributor address; City; State; Zip Code<br><br>Silver Spring, MD 20910                             | Amount of Contribution (\$)<br><br>\$100.00                  |
| Principal occupation / Job title (See Instructions)<br>Staff                 |   | Employer (See Instructions)<br>Democratic National Committee |
| Date<br>10/17/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Law Offices of Fidel Rodriguez Jr<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78212        | Amount of Contribution (\$)<br><br>\$500.00                  |
| Principal occupation / Job title (See Instructions)                          |   | Employer (See Instructions)                                  |
| Date<br>09/30/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Leaders We Deserve<br><hr/> Contributor address; City; State; Zip Code<br><br>Washington, DC 20003                        | Amount of Contribution (\$)<br><br>\$275,000.00              |
| Principal occupation / Job title (See Instructions)                          |   | Employer (See Instructions)                                  |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>    |  | <b>1</b> Total pages Schedule A1:<br>Sch: 50/95 Rpt: 53/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                           |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/07/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Leaders We Deserve<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Washington, DC 20003 | <b>7</b> Amount of Contribution (\$)<br><br>\$155,000.00    |
| <b>8</b> Principal occupation / Job title (See Instructions)        |  | <b>9</b> Employer (See Instructions)                        |
| Date<br>10/10/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Leaders We Deserve<br><hr/> Contributor address; City; State; Zip Code<br><br>Washington, DC 20003                   | Amount of Contribution (\$)<br><br>\$300,000.00             |
| Principal occupation / Job title (See Instructions)                 |  | Employer (See Instructions)                                 |
| Date<br>10/24/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Leaders We Deserve<br><hr/> Contributor address; City; State; Zip Code<br><br>Washington, DC 20003                   | Amount of Contribution (\$)<br><br>\$100,000.00             |
| Principal occupation / Job title (See Instructions)                 |  | Employer (See Instructions)                                 |
| Date<br>10/24/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Leaders We Deserve<br><hr/> Contributor address; City; State; Zip Code<br><br>Washington, DC 20003                   | Amount of Contribution (\$)<br><br>\$375,000.00             |
| Principal occupation / Job title (See Instructions)                 |  | Employer (See Instructions)                                 |
| Date<br>10/02/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Lemmond, byron<br><hr/> Contributor address; City; State; Zip Code<br><br>Katy, TX 77449-7504                        | Amount of Contribution (\$)<br><br>\$7.00                   |
| Principal occupation / Job title (See Instructions)<br>Not Employed |  | Employer (See Instructions)<br>Not Employed                 |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>             |   | <b>1</b> Total pages Schedule A1:<br>Sch: 51/95 Rpt: 54/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                    |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/09/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Lenz, Janice<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78258 | <b>7</b> Amount of Contribution (\$)<br><br>\$100.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed |   | <b>9</b> Employer (See Instructions)<br>Not Employed        |
| Date<br>10/11/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Leonard, Jane<br><hr/> Contributor address; City; State; Zip Code<br><br>Saint Paul, MN 55108                   | Amount of Contribution (\$)<br><br>\$25.00                  |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |   | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/22/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Lewis, Wesley<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78748                       | Amount of Contribution (\$)<br><br>\$25.00                  |
| Principal occupation / Job title (See Instructions)<br>Realtor               |   | Employer (See Instructions)<br>Lewis Commercial Realty Inc. |
| Date<br>10/07/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Lindsey, Rosanne<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78746                    | Amount of Contribution (\$)<br><br>\$50.00                  |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |   | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/06/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Lochart, James<br><hr/> Contributor address; City; State; Zip Code<br><br>New York, NY 10024                    | Amount of Contribution (\$)<br><br>\$1.25                   |
| Principal occupation / Job title (See Instructions)<br>Editor                |   | Employer (See Instructions)<br>Hearst Magazines             |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>               |   | <b>1</b> Total pages Schedule A1:<br>Sch: 52/95 Rpt: 55/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                      |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/23/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Loewy, Adam<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78701 | <b>7</b> Amount of Contribution (\$)<br><br>\$10,000.00     |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Law            |   | <b>9</b> Employer (See Instructions)<br>Loewy Law Firm      |
| Date<br>09/30/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Lofton, Suzy<br><hr/> Contributor address; City; State; Zip Code<br><br>Cedar Park, TX 78613              | Amount of Contribution (\$)<br><br>\$25.00                  |
| Principal occupation / Job title (See Instructions)<br>Deputy Superintendent   |   | Employer (See Instructions)<br>Lago Vista ISD               |
| Date<br>10/08/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Long, Meghan<br><hr/> Contributor address; City; State; Zip Code<br><br>Oakland, CA 94612                 | Amount of Contribution (\$)<br><br>\$4.16                   |
| Principal occupation / Job title (See Instructions)<br>Development Coordinator |   | Employer (See Instructions)<br>Vote Solar                   |
| Date<br>10/02/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Love, Julia<br><hr/> Contributor address; City; State; Zip Code<br><br>Rio Medina, TX 78066               | Amount of Contribution (\$)<br><br>\$5.00                   |
| Principal occupation / Job title (See Instructions)<br>Not Employed            |   | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/10/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Love, Julie<br><hr/> Contributor address; City; State; Zip Code<br><br>Rio Medina, TX 78066               | Amount of Contribution (\$)<br><br>\$10.00                  |
| Principal occupation / Job title (See Instructions)<br>Not Employed            |   | Employer (See Instructions)<br>Not Employed                 |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>             |   | <b>1</b> Total pages Schedule A1:<br>Sch: 53/95 Rpt: 56/157        |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                    |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920           |
| <b>4</b> Date<br>10/24/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Lowder, Michael<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Fort Worth, TX 76116 | <b>7</b> Amount of Contribution (\$)<br><br>\$22.73                |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed |   | <b>9</b> Employer (See Instructions)<br>Not Employed               |
| Date<br>10/09/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>MCDONALD, Susan<br><hr/> Contributor address; City; State; Zip Code<br><br>Washington, DC 20008                   | Amount of Contribution (\$)<br><br>\$9.09                          |
| Principal occupation / Job title (See Instructions)<br>Attorney              |   | Employer (See Instructions)<br>US Securities & Exhcnage Commission |
| Date<br>09/30/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Madden, Jeanne<br><hr/> Contributor address; City; State; Zip Code<br><br>Newton, MA 02461                        | Amount of Contribution (\$)<br><br>\$1.50                          |
| Principal occupation / Job title (See Instructions)<br>Associate Professor   |   | Employer (See Instructions)<br>Northeastern University             |
| Date<br>10/03/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Maller, Abigail<br><hr/> Contributor address; City; State; Zip Code<br><br>Los Angeles, CA 90043                  | Amount of Contribution (\$)<br><br>\$1.00                          |
| Principal occupation / Job title (See Instructions)<br>Physician             |   | Employer (See Instructions)<br>UCLA Health                         |
| Date<br>10/14/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Manatt, Linda<br><hr/> Contributor address; City; State; Zip Code<br><br>Ames, IA 50010-4191                      | Amount of Contribution (\$)<br><br>\$25.00                         |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |   | Employer (See Instructions)<br>Not Employed                        |



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>              |  | <b>1</b> Total pages Schedule A1:<br>Sch: 54/95 Rpt: 57/157  |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                     |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920     |
| <b>4</b> Date<br>10/10/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Marck, Eugene<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78209 | <b>7</b> Amount of Contribution (\$)<br><br>\$50.00          |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed  |  | <b>9</b> Employer (See Instructions)<br>Not Employed         |
| Date<br>10/20/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Marek, Moira<br><hr/> Contributor address; City; State; Zip Code<br><br>Raleigh, NC 27609                        | Amount of Contribution (\$)<br><br>\$50.00                   |
| Principal occupation / Job title (See Instructions)<br>Account Manager        |  | Employer (See Instructions)<br>Warchest                      |
| Date<br>10/04/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Martinez, Dennis<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78212                | Amount of Contribution (\$)<br><br>\$25.00                   |
| Principal occupation / Job title (See Instructions)<br>Tax Consultant         |  | Employer (See Instructions)<br>DMAssociates                  |
| Date<br>10/09/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Martinez, Dennis<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78212                | Amount of Contribution (\$)<br><br>\$100.00                  |
| Principal occupation / Job title (See Instructions)<br>Tax Consultant         |  | Employer (See Instructions)<br>Dennis Martinez               |
| Date<br>10/24/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Martinez, Kristen<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78249               | Amount of Contribution (\$)<br><br>\$1.00                    |
| Principal occupation / Job title (See Instructions)<br>Occupational Therapist |  | Employer (See Instructions)<br>Pediatric Therapy Specialists |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>                |   | <b>1</b> Total pages Schedule A1:<br>Sch: 55/95 Rpt: 58/157        |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                       |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920           |
| <b>4</b> Date<br>10/10/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Martinez, Priscila<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>San Francisco, CA 94117 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00                |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Program Manager |   | <b>9</b> Employer (See Instructions)<br>Chan Zuckerberg Initiative |
| Date<br>10/16/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Mary Ann Perez Campaign<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77017                    | Amount of Contribution (\$)<br><br>\$250.00                        |
| Principal occupation / Job title (See Instructions)                             |   | Employer (See Instructions)  |
| Date<br>10/11/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>McGarity, Cathleen<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78731                          | Amount of Contribution (\$)<br><br>\$50.00                         |
| Principal occupation / Job title (See Instructions)<br>Retired                  |   | Employer (See Instructions)<br>Not Employed                        |
| Date<br>10/04/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>McKnight, Barbara<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78704                           | Amount of Contribution (\$)<br><br>\$5.00                          |
| Principal occupation / Job title (See Instructions)<br>Not Employed             |   | Employer (See Instructions)<br>Not Employed                        |
| Date<br>10/13/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>McLeod, Hazel<br><hr/> Contributor address; City; State; Zip Code<br><br>Falls Church, VA 22043                         | Amount of Contribution (\$)<br><br>\$2.50                          |
| Principal occupation / Job title (See Instructions)<br>Not Employed             |   | Employer (See Instructions)<br>None                                |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>               |   | <b>1</b> Total pages Schedule A1:<br>Sch: 56/95 Rpt: 59/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                      |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/25/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>McMillan, William | <b>7</b> Amount of Contribution (\$) \$2.00                 |
| <b>6</b> Contributor address; City; State; Zip Code<br><br>Arlington, MA 02474 |   |   |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Musician       |   | <b>9</b> Employer (See Instructions)<br>Will McMillan       |
| Date<br>10/26/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>McNab, Alicia              | Amount of Contribution (\$) \$25.00                         |
| Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78212        |   |   |
| Principal occupation / Job title (See Instructions)<br>Lawyer                  |   | Employer (See Instructions)<br>USAO                         |
| Date<br>10/16/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Mcneaney, Molly            | Amount of Contribution (\$) \$100.00                        |
| Contributor address; City; State; Zip Code<br><br>van nuys, CA 91406           |   |   |
| Principal occupation / Job title (See Instructions)<br>Writer                  |   | Employer (See Instructions)<br>ABC                          |
| Date<br>10/10/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Meed, Alex                 | Amount of Contribution (\$) \$100.00                        |
| Contributor address; City; State; Zip Code<br><br>Austin, TX 78703             |   |   |
| Principal occupation / Job title (See Instructions)<br>Cybersecurity Analyst   |   | Employer (See Instructions)<br>Atlassian                    |
| Date<br>09/28/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Melanson, Christianne      | Amount of Contribution (\$) \$15.00                         |
| Contributor address; City; State; Zip Code<br><br>Bellaire, TX 77401-2503      |   |   |
| Principal occupation / Job title (See Instructions)<br>Accountant              |   | Employer (See Instructions)<br>Retired                      |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>            |   | <b>1</b> Total pages Schedule A1:<br>Sch: 57/95 Rpt: 60/157    |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                   |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920       |
| <b>4</b> Date<br>10/05/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Mellard, Jason | <b>7</b> Amount of Contribution (\$)<br><br>\$20.00            |
| <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78702 |   |  |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Historian   |   | <b>9</b> Employer (See Instructions)<br>Texas State University |
| Date<br>10/09/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Mellard, Jason          | Amount of Contribution (\$)<br><br>\$10.00                     |
| Contributor address; City; State; Zip Code<br><br>Austin, TX 78702          |   |  |
| Principal occupation / Job title (See Instructions)<br>Historian            |   | Employer (See Instructions)<br>Texas State University          |
| Date<br>10/08/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Meredith, James         | Amount of Contribution (\$)<br><br>\$10.00                     |
| Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78251     |   |  |
| Principal occupation / Job title (See Instructions)<br>Not Employed         |   | Employer (See Instructions)<br>Not Employed                    |
| Date<br>10/08/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Meyer, James            | Amount of Contribution (\$)<br><br>\$1.00                      |
| Contributor address; City; State; Zip Code<br><br>Conroe, TX 77348          |   |  |
| Principal occupation / Job title (See Instructions)<br>Not Employed         |   | Employer (See Instructions)<br>Not Employed                    |
| Date<br>10/09/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Miller, Asher           | Amount of Contribution (\$)<br><br>\$25.00                     |
| Contributor address; City; State; Zip Code<br><br>Evanston, IL 60201        |   |  |
| Principal occupation / Job title (See Instructions)<br>Educator             |   | Employer (See Instructions)<br>CASEL                           |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>               |   | <b>1</b> Total pages Schedule A1:<br>Sch: 58/95 Rpt: 61/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                      |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>09/30/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Miller, Connie<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Lubbock, TX 79424 | <b>7</b> Amount of Contribution (\$)<br><br>\$100.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Homemaker      |   | <b>9</b> Employer (See Instructions)<br>Self                |
| Date<br>10/18/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Miller, Montgomery<br><hr/> Contributor address; City; State; Zip Code<br><br>Huntington Beach, CA 92646      | Amount of Contribution (\$)<br><br>\$1,000.00               |
| Principal occupation / Job title (See Instructions)<br>Data Analyst            |   | Employer (See Instructions)<br>R1 RCM                       |
| Date<br>09/30/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Monsanto, Natalie<br><hr/> Contributor address; City; State; Zip Code<br><br>Los Angeles, CA 90041            | Amount of Contribution (\$)<br><br>\$50.00                  |
| Principal occupation / Job title (See Instructions)<br>Communications Director |   | Employer (See Instructions)<br>UCLA                         |
| Date<br>10/16/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Montelongo, Natalie<br><hr/> Contributor address; City; State; Zip Code<br><br>Washington, DC 20009           | Amount of Contribution (\$)<br><br>\$200.00                 |
| Principal occupation / Job title (See Instructions)<br>Political               |   | Employer (See Instructions)<br>Pivotal Ventures             |
| Date<br>10/12/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Montrose, Marc<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78702                    | Amount of Contribution (\$)<br><br>\$25.00                  |
| Principal occupation / Job title (See Instructions)<br>Data Analyst            |   | Employer (See Instructions)<br>GenPrex                      |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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|---|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>                  |   | <b>1</b> Total pages Schedule A1:<br>Sch: 59/95 Rpt: 62/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian   |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/16/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Moran, Paris | <b>7</b> Amount of Contribution (\$)<br><br>\$50.00         |
| <b>6</b> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78253  |   |   |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Creative Producer |   | <b>9</b> Employer (See Instructions)<br>EPA                 |
| Date<br>10/03/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Morrison, Marisa      | Amount of Contribution (\$)<br><br>\$1.00                   |
| Contributor address; City; State; Zip Code<br><br>Chestnut Hill, MA 02467         |   |   |
| Principal occupation / Job title (See Instructions)<br>Researcher                 |   | Employer (See Instructions)<br>RTI InternationL             |
| Date<br>10/09/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Mundstock, Ron        | Amount of Contribution (\$)<br><br>\$50.00                  |
| Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78215-1920      |   |   |
| Principal occupation / Job title (See Instructions)<br>Program Analyst            |   | Employer (See Instructions)<br>DoD                          |
| Date<br>09/27/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Murphy, Michael       | Amount of Contribution (\$)<br><br>\$200.00                 |
| Contributor address; City; State; Zip Code<br><br>Kensington, MD 20895            |   |   |
| Principal occupation / Job title (See Instructions)<br>Manager                    |   | Employer (See Instructions)<br>Lake Research Partners       |
| Date<br>09/29/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Musselman, KT         | Amount of Contribution (\$)<br><br>\$25.00                  |
| Contributor address; City; State; Zip Code<br><br>Austin, TX 78717                |   |   |
| Principal occupation / Job title (See Instructions)<br>Justice of the Peace       |   | Employer (See Instructions)<br>Williamson County            |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>                     |   | <b>1</b> Total pages Schedule A1:<br>Sch: 60/95 Rpt: 63/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian  |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/03/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Musselman, KT<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78717 | <b>7</b> Amount of Contribution (\$)<br><br>\$10.00         |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Justice of the Peace |   | <b>9</b> Employer (See Instructions)<br>Williamson County   |
| Date<br>10/16/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Musselman, KT<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78717                   | Amount of Contribution (\$)<br><br>\$2.01                   |
| Principal occupation / Job title (See Instructions)<br>Justice of the Peace          |   | Employer (See Instructions)<br>Williamson County            |
| Date<br>09/30/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Nations, Howard<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77042                | Amount of Contribution (\$)<br><br>\$500.00                 |
| Principal occupation / Job title (See Instructions)<br>Attorney                      |   | Employer (See Instructions)<br>Self                         |
| Date<br>10/23/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Nava, Alex<br><hr/> Contributor address; City; State; Zip Code<br><br>Shavano Park, TX 78230                | Amount of Contribution (\$)<br><br>\$250.00                 |
| Principal occupation / Job title (See Instructions)<br>Attorney                      |   | Employer (See Instructions)<br>ANG PLLC                     |
| Date<br>10/10/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Neverdowski, Stephanie<br><hr/> Contributor address; City; State; Zip Code<br><br>Katy, TX 77450-7552       | Amount of Contribution (\$)<br><br>\$2.27                   |
| Principal occupation / Job title (See Instructions)<br>Not Employed                  |   | Employer (See Instructions)<br>Not Employed                 |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>             |   | <b>1</b> Total pages Schedule A1:<br>Sch: 61/95 Rpt: 64/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                    |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/25/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Nicholls, Rosalie<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78748 | <b>7</b> Amount of Contribution (\$)<br><br>\$10.00         |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed |   | <b>9</b> Employer (See Instructions)<br>Not Employed        |
| Date<br>10/22/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Nicholson, Arthur<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78204              | Amount of Contribution (\$)<br><br>\$176.00                 |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |   | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/21/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Nilsen, Benjamin<br><hr/> Contributor address; City; State; Zip Code<br><br>Vallejo, CA 94589                   | Amount of Contribution (\$)<br><br>\$1.00                   |
| Principal occupation / Job title (See Instructions)<br>Process Technician II |   | Employer (See Instructions)<br>Thermo Fisher Scientific     |
| Date<br>10/25/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Nole, Amelia<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 79249                   | Amount of Contribution (\$)<br><br>\$1.00                   |
| Principal occupation / Job title (See Instructions)<br>Physical              |   | Employer (See Instructions)<br>Physical Therapy             |
| Date<br>10/10/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Norris, Robert<br><hr/> Contributor address; City; State; Zip Code<br><br>San Marcos, TX 78666                  | Amount of Contribution (\$)<br><br>\$10.00                  |
| Principal occupation / Job title (See Instructions)<br>Planner               |   | Employer (See Instructions)<br>Texas General Land Office    |



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>             |  | <b>1</b> Total pages Schedule A1:<br>Sch: 62/95 Rpt: 65/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                    |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>09/30/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Obenauf, Margaret<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Albuquerque, NM 87109 | <b>7</b> Amount of Contribution (\$)<br><br>\$100.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed |  | <b>9</b> Employer (See Instructions)<br>Not Employed        |
| Date<br>10/05/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Odarling, Cait O'Darling<br><hr/> Contributor address; City; State; Zip Code<br><br>Tulsa, OK 74114                  | Amount of Contribution (\$)<br><br>\$1.25                   |
| Principal occupation / Job title (See Instructions)<br>LPI                   |  | Employer (See Instructions)<br>Self Employed                |
| Date<br>10/02/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Oglethorpe, Janet<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78230                   | Amount of Contribution (\$)<br><br>\$50.00                  |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |  | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/05/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Ohr, Frank<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77018                              | Amount of Contribution (\$)<br><br>\$250.00                 |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |  | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/03/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Olivares, Michael<br><hr/> Contributor address; City; State; Zip Code<br><br>Helotes, TX 78023                       | Amount of Contribution (\$)<br><br>\$25.00                  |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |  | Employer (See Instructions)<br>Not Employed                 |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>       |   | <b>1</b> Total pages Schedule A1:<br>Sch: 63/95 Rpt: 66/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                              |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/04/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Olsson, Karen<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78722 | <b>7</b> Amount of Contribution (\$)<br><br>\$100.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Writer |   | <b>9</b> Employer (See Instructions)<br>Karen Olsson        |
| Date<br>10/13/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Oswald, Peter<br><hr/> Contributor address; City; State; Zip Code<br><br>Wescosville, PA 18106              | Amount of Contribution (\$)<br><br>\$2.50                   |
| Principal occupation / Job title (See Instructions)<br>Not Employed    |   | Employer (See Instructions)<br>None                         |
| Date<br>09/29/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Ouellette, Chelsie<br><hr/> Contributor address; City; State; Zip Code<br><br>Amesbury, MA 01913            | Amount of Contribution (\$)<br><br>\$50.00                  |
| Principal occupation / Job title (See Instructions)<br>Student         |   | Employer (See Instructions)<br>N/A                          |
| Date<br>10/09/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Pacheco, Yvonne<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78221            | Amount of Contribution (\$)<br><br>\$100.00                 |
| Principal occupation / Job title (See Instructions)<br>CNA             |   | Employer (See Instructions)<br>Unios                        |
| Date<br>10/05/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Padula, Carolyn<br><hr/> Contributor address; City; State; Zip Code<br><br>Gorham, ME 04038                 | Amount of Contribution (\$)<br><br>\$50.00                  |
| Principal occupation / Job title (See Instructions)<br>Not Employed    |   | Employer (See Instructions)<br>Not Employed                 |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>             |   | <b>1</b> Total pages Schedule A1:<br>Sch: 64/95 Rpt: 67/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                    |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/09/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Parrish, Anne Thatcher<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78209 | <b>7</b> Amount of Contribution (\$)<br><br>\$100.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed |   | <b>9</b> Employer (See Instructions)<br>Not Employed        |
| Date<br>10/06/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Patey, Gretchen<br><hr/> Contributor address; City; State; Zip Code<br><br>Madison, WI 53701                              | Amount of Contribution (\$)<br><br>\$5.00                   |
| Principal occupation / Job title (See Instructions)<br>Waitstaff             |   | Employer (See Instructions)<br>Monona Catering              |
| Date<br>09/30/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Payne, Benton<br><hr/> Contributor address; City; State; Zip Code<br><br>Dallas, TX 75206                                 | Amount of Contribution (\$)<br><br>\$4.54                   |
| Principal occupation / Job title (See Instructions)<br>Consultant            |   | Employer (See Instructions)<br>MBP Advisors                 |
| Date<br>10/14/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Payne, Benton<br><hr/> Contributor address; City; State; Zip Code<br><br>Dallas, TX 75206                                 | Amount of Contribution (\$)<br><br>\$9.09                   |
| Principal occupation / Job title (See Instructions)<br>Consultant            |   | Employer (See Instructions)<br>MBP Advisors                 |
| Date<br>10/22/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Perez-King, Vanessa<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78249                      | Amount of Contribution (\$)<br><br>\$2.63                   |
| Principal occupation / Job title (See Instructions)<br>Senior Product Owner  |   | Employer (See Instructions)<br>USAA                         |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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|---|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>                              |   | <b>1</b> Total pages Schedule A1:<br>Sch: 65/95 Rpt: 68/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian   |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/19/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Perrenod, William | <b>7</b> Amount of Contribution (\$) \$25.00                |
| <b>6</b> Contributor address; City; State; Zip Code<br><br>New Orleans, LA 70117              |   |   |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Nonprofit Business Consultant |   | <b>9</b> Employer (See Instructions)<br>Self                |
| Date<br>10/01/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Phenix, Linda              | Amount of Contribution (\$) \$25.00                         |
| Contributor address; City; State; Zip Code<br><br>Houston, TX 77042                           |   |   |
| Principal occupation / Job title (See Instructions)<br>Grant Writer                           |   | Employer (See Instructions)<br>Self-employed                |
| Date<br>10/05/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Pieper, Raphael            | Amount of Contribution (\$) \$1.00                          |
| Contributor address; City; State; Zip Code<br><br>Colorado Springs, CO 80920                  |   |   |
| Principal occupation / Job title (See Instructions)<br>Massage therapy                        |   | Employer (See Instructions)<br>Salon 21                     |
| Date<br>10/14/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Plaza III, Sergio          | Amount of Contribution (\$) \$100.00                        |
| Contributor address; City; State; Zip Code<br><br>Austin, TX 78748                            |   |   |
| Principal occupation / Job title (See Instructions)<br>Planning Manager                       |   | Employer (See Instructions)<br>Travis County                |
| Date<br>10/10/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Pliszka, Steven            | Amount of Contribution (\$) \$500.00                        |
| Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78232                       |   |   |
| Principal occupation / Job title (See Instructions)<br>Professor                              |   | Employer (See Instructions)<br>University of Texas          |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>         |  | <b>1</b> Total pages Schedule A1:<br>Sch: 66/95 Rpt: 69/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/19/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Podmore, Lucy<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78230 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00         |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Educator |  | <b>9</b> Employer (See Instructions)<br>Public School       |
| Date<br>10/04/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Powell, Greig<br><hr/> Contributor address; City; State; Zip Code<br><br>San Leon, TX 77539                      | Amount of Contribution (\$)<br><br>\$2.00                   |
| Principal occupation / Job title (See Instructions)<br>Not employed      |  | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/06/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Powell, Greig<br><hr/> Contributor address; City; State; Zip Code<br><br>San Leon, TX 77539                      | Amount of Contribution (\$)<br><br>\$3.00                   |
| Principal occupation / Job title (See Instructions)<br>Not Employed      |  | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/07/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Powell, Greig<br><hr/> Contributor address; City; State; Zip Code<br><br>San Leon, TX 77539                      | Amount of Contribution (\$)<br><br>\$3.00                   |
| Principal occupation / Job title (See Instructions)<br>Not employed      |  | Employer (See Instructions)<br>Not employed                 |
| Date<br>10/09/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Powell, Greig<br><hr/> Contributor address; City; State; Zip Code<br><br>San Leon, TX 77539                      | Amount of Contribution (\$)<br><br>\$4.00                   |
| Principal occupation / Job title (See Instructions)<br>Not Employed      |  | Employer (See Instructions)<br>Not Employed                 |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>       |   | <b>1</b> Total pages Schedule A1:<br>Sch: 67/95 Rpt: 70/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                              |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/24/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Powered By People<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Washington, DC 20003 | <b>7</b> Amount of Contribution (\$)<br><br>\$10,000.00     |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>_____  |   | <b>9</b> Employer (See Instructions)<br>_____               |
| Date<br>10/03/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Powers, Sheryl<br><hr/> Contributor address; City; State; Zip Code<br><br>New Waverly, TX 77358                     | Amount of Contribution (\$)<br><br>\$50.00                  |
| Principal occupation / Job title (See Instructions)<br>Instructor      |   | Employer (See Instructions)<br>SAIC                         |
| Date<br>10/20/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Puente, Jaime<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78759                           | Amount of Contribution (\$)<br><br>\$25.00                  |
| Principal occupation / Job title (See Instructions)<br>Policy Analyst  |   | Employer (See Instructions)<br>Every Texan                  |
| Date<br>10/10/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Quaintance, Don<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77006                        | Amount of Contribution (\$)<br><br>\$25.00                  |
| Principal occupation / Job title (See Instructions)<br>Graphic Design  |   | Employer (See Instructions)<br>Public Address               |
| Date<br>10/25/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>R Brower, Cameron<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78723                       | Amount of Contribution (\$)<br><br>\$300.00                 |
| Principal occupation / Job title (See Instructions)<br>DevOps Engineer |   | Employer (See Instructions)<br>Digital Turbine              |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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|---|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>                        |   | <b>1</b> Total pages Schedule A1:<br>Sch: 68/95 Rpt: 71/157   |
| <b>2</b> FILER NAME<br>Carranza, Kristian   |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920      |
| <b>4</b> Date<br>09/27/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Rabe, Mary | <b>7</b> Amount of Contribution (\$) \$50.00                  |
| <b>6</b> Contributor address; City; State; Zip Code<br><br>College Station, TX 77845    |   |   |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Manager                 |   | <b>9</b> Employer (See Instructions)<br>Rio de Los Suenos LLC |
| Date<br>10/20/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Raffaelli, Paulo    | Amount of Contribution (\$) \$2.09                            |
| Contributor address; City; State; Zip Code<br><br>San Francisco, CA 94112               |   |   |
| Principal occupation / Job title (See Instructions)<br>Engineer                         |   | Employer (See Instructions)<br>Cisco Meraki                   |
| Date<br>09/27/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Rakowitz, Sunnee    | Amount of Contribution (\$) \$100.00                          |
| Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78210                 |   |   |
| Principal occupation / Job title (See Instructions)<br>Not Employed                     |   | Employer (See Instructions)<br>Not Employed                   |
| Date<br>10/09/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Randall, Roby       | Amount of Contribution (\$) \$25.00                           |
| Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78232                 |   |   |
| Principal occupation / Job title (See Instructions)<br>Director of Information Security |   | Employer (See Instructions)<br>HCA                            |
| Date<br>10/10/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Ranson, Kelly       | Amount of Contribution (\$) \$200.00                          |
| Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78209                 |   |   |
| Principal occupation / Job title (See Instructions)<br>Real Estate Broker               |   | Employer (See Instructions)<br>Ranson Properties              |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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|--|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>                           |   | <b>1</b> Total pages Schedule A1:<br>Sch: 69/95 Rpt: 72/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian  |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/14/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Rayner, Robin<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Pflugerville, TX 78660 | <b>7</b> Amount of Contribution (\$)<br><br>\$100.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed               |   | <b>9</b> Employer (See Instructions)<br>Not Employed        |
| Date<br>10/20/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Real, Sheldon<br><hr/> Contributor address; City; State; Zip Code<br><br>Cathedral City, CA 92234                 | Amount of Contribution (\$)<br><br>\$10.00                  |
| Principal occupation / Job title (See Instructions)<br>Accountant                          |   | Employer (See Instructions)<br>Eisenhower Medical Center    |
| Date<br>10/25/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Reichel, Lauren<br><hr/> Contributor address; City; State; Zip Code<br><br>Napa, CA 94558                         | Amount of Contribution (\$)<br><br>\$25.00                  |
| Principal occupation / Job title (See Instructions)<br>Pet and House Sitter and Dog Walker |   | Employer (See Instructions)<br>Self                         |
| Date<br>10/19/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Rendon, Michael<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78251                  | Amount of Contribution (\$)<br><br>\$2.63                   |
| Principal occupation / Job title (See Instructions)<br>Banker                              |   | Employer (See Instructions)<br>Broadway Bank                |
| Date<br>10/26/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Rendon, Michael<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78251                  | Amount of Contribution (\$)<br><br>\$4.35                   |
| Principal occupation / Job title (See Instructions)<br>Banker                              |   | Employer (See Instructions)<br>Broadway Bank                |



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>    |   | 1 Total pages Schedule A1:<br>Sch: 70/95 Rpt: 73/157 |
| 2 FILER NAME<br>Carranza, Kristian                                  |   | 3 Filer ID (Ethics Commission Filers)<br>00087920    |
| 4 Date<br>10/18/2024  | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Represent Texas | 7 Amount of Contribution (\$)<br>\$5,000.00          |
|   | 6 Contributor address; City; State; Zip Code<br><br>Dallas, TX 75214                                  |  |
| 8 Principal occupation / Job title (See Instructions)               |   | 9 Employer (See Instructions)                        |
| Date<br>10/03/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Ressin, Jeff      | Amount of Contribution (\$)<br>\$250.00              |
|   | Contributor address; City; State; Zip Code<br><br>Vienna, VA 22180                                    |  |
| Principal occupation / Job title (See Instructions)<br>Consultant   |   | Employer (See Instructions)<br>Self                  |
| Date<br>10/17/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Reyes, Norma      | Amount of Contribution (\$)<br>\$100.00              |
|   | Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78228                               |  |
| Principal occupation / Job title (See Instructions)<br>Not Employed |   | Employer (See Instructions)<br>Not Employed          |
| Date<br>09/27/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Reyes, Robert     | Amount of Contribution (\$)<br>\$100.00              |
|   | Contributor address; City; State; Zip Code<br><br>Covina, CA 91722                                    |  |
| Principal occupation / Job title (See Instructions)<br>Not Employed |   | Employer (See Instructions)<br>Not Employed          |
| Date<br>10/13/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Richmond, Clint   | Amount of Contribution (\$)<br>\$5.00                |
|   | Contributor address; City; State; Zip Code<br><br>Brookline, MA 02445                                 |  |
| Principal occupation / Job title (See Instructions)<br>Consultant   |   | Employer (See Instructions)<br>Self                  |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>                   |   | <b>1</b> Total pages Schedule A1:<br>Sch: 71/95 Rpt: 74/157                 |
| <b>2</b> FILER NAME<br>Carranza, Kristian  |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920                    |
| <b>4</b> Date<br>10/21/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Riklin, Rand<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78218 | <b>7</b> Amount of Contribution (\$)<br><br>\$500.00                        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Lawyer             |   | <b>9</b> Employer (See Instructions)<br>Goode Casseb Riklin Choate & Watson |
| Date<br>09/28/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Rivera, Ian<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77042                        | Amount of Contribution (\$)<br><br>\$250.00                                 |
| Principal occupation / Job title (See Instructions)<br>Regional Political Director |   | Employer (See Instructions)<br>DLCC   |
| Date<br>10/04/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Robinson, Riley<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78210-1613           | Amount of Contribution (\$)<br><br>\$50.00                                  |
| Principal occupation / Job title (See Instructions)<br>Director                    |   | Employer (See Instructions)<br>Artpace San Antonio                          |
| Date<br>09/27/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Robus, Patricia<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78749                     | Amount of Contribution (\$)<br><br>\$25.00                                  |
| Principal occupation / Job title (See Instructions)<br>Dentist                     |   | Employer (See Instructions)<br>Pediatric Dental Professionals               |
| Date<br>10/01/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Rocha, Matt<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78242                    | Amount of Contribution (\$)<br><br>\$10.00                                  |
| Principal occupation / Job title (See Instructions)<br>Not Employed                |   | Employer (See Instructions)<br>Not Employed                                 |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>             |  | <b>1</b> Total pages Schedule A1:<br>Sch: 72/95 Rpt: 75/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                    |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/08/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Rodriguez, David<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Fayetteville, PA 17222 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00         |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed |  | <b>9</b> Employer (See Instructions)<br>Not Employed        |
| Date<br>10/06/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Rodriguez, Louis<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78233                    | Amount of Contribution (\$)<br><br>\$25.00                  |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |  | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/24/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Rogers, Kathryn<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78757                          | Amount of Contribution (\$)<br><br>\$5.00                   |
| Principal occupation / Job title (See Instructions)<br>Editor                |  | Employer (See Instructions)<br>Self                         |
| Date<br>09/27/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Rolke, Paul<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78704                              | Amount of Contribution (\$)<br><br>\$50.00                  |
| Principal occupation / Job title (See Instructions)<br>Rancher               |  | Employer (See Instructions)<br>Self                         |
| Date<br>10/17/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Rolke, Paul<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78704                              | Amount of Contribution (\$)<br><br>\$40.00                  |
| Principal occupation / Job title (See Instructions)<br>Rancher               |  | Employer (See Instructions)<br>Self                         |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>                   |  | <b>1</b> Total pages Schedule A1:<br>Sch: 73/95 Rpt: 76/157   |
| <b>2</b> FILER NAME<br>Carranza, Kristian  |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920      |
| <b>4</b> Date<br>10/07/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Rose, Sherri<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>San Carlos, CA 94070 | <b>7</b> Amount of Contribution (\$)<br><br>\$50.00           |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Consultant         |  | <b>9</b> Employer (See Instructions)<br>Self                  |
| Date<br>09/27/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Rosenstock, Sara<br><hr/> Contributor address; City; State; Zip Code<br><br>Encino, CA 91316                   | Amount of Contribution (\$)<br><br>\$100.00                   |
| Principal occupation / Job title (See Instructions)<br>Researcher                  |  | Employer (See Instructions)<br>Sweetum Productions            |
| Date<br>10/25/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Rosenthal, Ilene<br><hr/> Contributor address; City; State; Zip Code<br><br>Yonkers, NY 10705                  | Amount of Contribution (\$)<br><br>\$100.00                   |
| Principal occupation / Job title (See Instructions)<br>Business Owner              |  | Employer (See Instructions)<br>Self                           |
| Date<br>09/28/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Rosenthal, Jon<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77041                    | Amount of Contribution (\$)<br><br>\$500.00                   |
| Principal occupation / Job title (See Instructions)<br>State Rep                   |  | Employer (See Instructions)<br>Texas House of Representatives |
| Date<br>10/08/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Rubinstein, Jacob<br><hr/> Contributor address; City; State; Zip Code<br><br>Washington, DC 20002              | Amount of Contribution (\$)<br><br>\$100.00                   |
| Principal occupation / Job title (See Instructions)<br>Sr. Data Manager   Pollster |  | Employer (See Instructions)<br>Hit strategies                 |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>             |  | <b>1</b> Total pages Schedule A1:<br>Sch: 74/95 Rpt: 77/157          |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                    |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920             |
| <b>4</b> Date<br>10/10/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Ruddell, Steven<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Kilauea, HI 96754 | <b>7</b> Amount of Contribution (\$)<br><br>\$5.00                   |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed |  | <b>9</b> Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/16/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Rupert, Maya<br><hr/> Contributor address; City; State; Zip Code<br><br>Brooklyn, NY 11201                     | Amount of Contribution (\$)<br><br>\$250.00                          |
| Principal occupation / Job title (See Instructions)<br>Campaign Manager      |  | Employer (See Instructions)<br>Maya for Mayor                        |
| Date<br>10/11/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Rusk, Mitzi<br><hr/> Contributor address; City; State; Zip Code<br><br>Tyler, TX 75703                         | Amount of Contribution (\$)<br><br>\$1,027.00                        |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |  | Employer (See Instructions)<br>Not Employed                          |
| Date<br>10/19/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Rustum, Roohi<br><hr/> Contributor address; City; State; Zip Code<br><br>Boston, MA 02119                      | Amount of Contribution (\$)<br><br>\$25.00                           |
| Principal occupation / Job title (See Instructions)<br>Engagement Director   |  | Employer (See Instructions)<br>Boston Schools Fund                   |
| Date<br>10/16/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Ryan, Casey<br><hr/> Contributor address; City; State; Zip Code<br><br>Los Angeles, CA 90026-1238              | Amount of Contribution (\$)<br><br>\$10.00                           |
| Principal occupation / Job title (See Instructions)<br>Project Director      |  | Employer (See Instructions)<br>Social and Enviromental Entrepreneurs |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>                  |  | <b>1</b> Total pages Schedule A1:<br>Sch: 75/95 Rpt: 78/157  |
| <b>2</b> FILER NAME<br>Carranza, Kristian   |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920     |
| <b>4</b> Date<br>10/04/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Sachse, Christoph<br>.....<br><b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78751 | <b>7</b> Amount of Contribution (\$)<br><br>\$10.00          |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Software Engineer |  | <b>9</b> Employer (See Instructions)<br>Google LLC           |
| Date<br>10/07/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Sakai, Kathy<br>.....<br>Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78209-2471              | Amount of Contribution (\$)<br><br>\$100.00                  |
| Principal occupation / Job title (See Instructions)<br>Not Employed               |  | Employer (See Instructions)<br>Not Employed                  |
| Date<br>10/05/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Sanchez, Bryan<br>.....<br>Contributor address; City; State; Zip Code<br><br>Houston, TX 77019                     | Amount of Contribution (\$)<br><br>\$200.00                  |
| Principal occupation / Job title (See Instructions)<br>Consultant                 |  | Employer (See Instructions)<br>Boston Consulting Group       |
| Date<br>10/22/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Saucedo, Kim<br>.....<br>Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78255                   | Amount of Contribution (\$)<br><br>\$25.00                   |
| Principal occupation / Job title (See Instructions)<br>Nurse Practitioner         |  | Employer (See Instructions)<br>Dorothy Saucedo               |
| Date<br>10/05/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Sawtelle, Scott<br>.....<br>Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78209                | Amount of Contribution (\$)<br><br>\$2,500.00                |
| Principal occupation / Job title (See Instructions)<br>Investment Adviser         |  | Employer (See Instructions)<br>Nelson Van Denburg & Campbell |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>             |   | <b>1</b> Total pages Schedule A1:<br>Sch: 76/95 Rpt: 79/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                    |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/08/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Scanlan, John<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78746 | <b>7</b> Amount of Contribution (\$)<br><br>\$1,000.00      |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed |   | <b>9</b> Employer (See Instructions)<br>Not Employed        |
| Date<br>10/13/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Schaeffer, Julia<br><hr/> Contributor address; City; State; Zip Code<br><br>Frederick, MD 21701             | Amount of Contribution (\$)<br><br>\$25.00                  |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |   | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/06/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Scheringer, Jason<br><hr/> Contributor address; City; State; Zip Code<br><br>Nanuet, NY 10954               | Amount of Contribution (\$)<br><br>\$5.00                   |
| Principal occupation / Job title (See Instructions)<br>Digital Compliance    |   | Employer (See Instructions)<br>Strategic Education Inc.     |
| Date<br>09/30/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Schneider, Joan<br><hr/> Contributor address; City; State; Zip Code<br><br>Seattle, WA 98106                | Amount of Contribution (\$)<br><br>\$37.50                  |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |   | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/18/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Schroer, Steve<br><hr/> Contributor address; City; State; Zip Code<br><br>Bartlett, IL 60103                | Amount of Contribution (\$)<br><br>\$10.00                  |
| Principal occupation / Job title (See Instructions)<br>Driver                |   | Employer (See Instructions)<br>Self                         |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>                               |  | <b>1</b> Total pages Schedule A1:<br>Sch: 77/95 Rpt: 80/157   |
| <b>2</b> FILER NAME<br>Carranza, Kristian  |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920      |
| <b>4</b> Date<br>10/24/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Schroller, Alex | <b>7</b> Amount of Contribution (\$) \$4.00                   |
| <b>6</b> Contributor address; City; State; Zip Code<br><br>Houston, TX 77005                   |  |   |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Technical Trainer              |  | <b>9</b> Employer (See Instructions)<br>PROS                  |
| Date<br>10/02/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Schwartz, Jared          | Amount of Contribution (\$) \$20.00                           |
| Contributor address; City; State; Zip Code<br><br>Dallas, TX 75248                             |  |   |
| Principal occupation / Job title (See Instructions)<br>Teacher                                 |  | Employer (See Instructions)<br>Self                           |
| Date<br>10/14/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Sebian lander, Cynthia   | Amount of Contribution (\$) \$25.00                           |
| Contributor address; City; State; Zip Code<br><br>Huntingtown, MD 20639                        |  |   |
| Principal occupation / Job title (See Instructions)<br>Senior Campaign and Election Specialist |  | Employer (See Instructions)<br>National Education Association |
| Date<br>10/04/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Serna, Baltazar          | Amount of Contribution (\$) \$500.00                          |
| Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78258                        |  |   |
| Principal occupation / Job title (See Instructions)<br>Attorney                                |  | Employer (See Instructions)<br>Self Employed                  |
| Date<br>10/10/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Sexton, Janette          | Amount of Contribution (\$) \$20.23                           |
| Contributor address; City; State; Zip Code<br><br>Pasadena, TX 77503                           |  |   |
| Principal occupation / Job title (See Instructions)<br>Retired                                 |  | Employer (See Instructions)<br>None                           |



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>           |  | <b>1</b> Total pages Schedule A1:<br>Sch: 78/95 Rpt: 81/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                  |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/13/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Shachoy, Jamey<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Marion, MA 02738 | <b>7</b> Amount of Contribution (\$)<br><br>\$500.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Consulting |  | <b>9</b> Employer (See Instructions)<br>Accenture           |
| Date<br>10/10/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Shaw, John<br><hr/> Contributor address; City; State; Zip Code<br><br>Seattle, WA 98117                      | Amount of Contribution (\$)<br><br>\$15.00                  |
| Principal occupation / Job title (See Instructions)<br>Not Employed        |  | Employer (See Instructions)<br>Not Employed                 |
| Date<br>09/27/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Shawver, Scott<br><hr/> Contributor address; City; State; Zip Code<br><br>Lake Forest, CA 92630              | Amount of Contribution (\$)<br><br>\$25.00                  |
| Principal occupation / Job title (See Instructions)<br>Not Employed        |  | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/06/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Sheikholeslami, Bahram<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77079          | Amount of Contribution (\$)<br><br>\$5.00                   |
| Principal occupation / Job title (See Instructions)<br>Not Employed        |  | Employer (See Instructions)<br>Not Employed                 |
| Date<br>09/30/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Shelby, Laura<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77024                   | Amount of Contribution (\$)<br><br>\$50.00                  |
| Principal occupation / Job title (See Instructions)<br>Not Employed        |  | Employer (See Instructions)<br>Not Employed                 |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>               |  | 1 Total pages Schedule A1:<br>Sch: 79/95 Rpt: 82/157 |
| 2 FILER NAME<br>Carranza, Kristian   |  | 3 Filer ID (Ethics Commission Filers)<br>00087920    |
| 4 Date<br>10/14/2024   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Shipley, John                        | 7 Amount of Contribution (\$)<br>\$200.00            |
|  | 6 Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78209  |  |
| 8 Principal occupation / Job title (See Instructions)<br>Oil & Gas Real Estate |  | 9 Employer (See Instructions)<br>Self                |
| Date<br>10/02/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Shute, Bill                            | Amount of Contribution (\$)<br>\$5.00                |
|  | Contributor address; City; State; Zip Code<br><br>Universal City, TX 78148   |  |
| Principal occupation / Job title (See Instructions)<br>College Professor       |  | Employer (See Instructions)<br>San Antonio College   |
| Date<br>10/06/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Siemers-Kennedy, Laura                 | Amount of Contribution (\$)<br>\$5.00                |
|  | Contributor address; City; State; Zip Code<br><br>Houston, TX 77019  |  |
| Principal occupation / Job title (See Instructions)<br>Engineer                |  | Employer (See Instructions)<br>Mott MacDonald        |
| Date<br>10/08/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Sierra Club Political Action Committee | Amount of Contribution (\$)<br>\$2,000.00            |
|  | Contributor address; City; State; Zip Code<br><br>Austin, TX 78765   |  |
| Principal occupation / Job title (See Instructions)                            |  | Employer (See Instructions)                          |
| Date<br>10/25/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Sill, Alan                             | Amount of Contribution (\$)<br>\$22.73               |
|  | Contributor address; City; State; Zip Code<br><br>Lubbock, TX 79424-1705   |  |
| Principal occupation / Job title (See Instructions)<br>Scientist               |  | Employer (See Instructions)<br>Texas Tech University |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>           |   | <b>1</b> Total pages Schedule A1:<br>Sch: 80/95 Rpt: 83/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                  |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>09/27/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Silvetti, Erin<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Rockaway Park, NY 11694 | <b>7</b> Amount of Contribution (\$)<br><br>\$1.00          |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Marketing  |   | <b>9</b> Employer (See Instructions)<br>Christine Valmy     |
| Date<br>10/21/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Simpson, Malcolm<br><hr/> Contributor address; City; State; Zip Code<br><br>Las Vegas, NV 89104                     | Amount of Contribution (\$)<br><br>\$20.00                  |
| Principal occupation / Job title (See Instructions)<br>Not employed        |   | Employer (See Instructions)<br>Not employed                 |
| Date<br>10/22/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Smith, Cheryl<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77098                          | Amount of Contribution (\$)<br><br>\$50.00                  |
| Principal occupation / Job title (See Instructions)<br>Community organizer |   | Employer (See Instructions)<br>Clean Water Action           |
| Date<br>10/04/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Smith, Christopher<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77005                     | Amount of Contribution (\$)<br><br>\$25.00                  |
| Principal occupation / Job title (See Instructions)<br>Not Employed        |   | Employer (See Instructions)<br>Not Employed                 |
| Date<br>09/28/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Snell, Barry<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78209                       | Amount of Contribution (\$)<br><br>\$50.00                  |
| Principal occupation / Job title (See Instructions)<br>Lawyer              |   | Employer (See Instructions)<br>Snell & Snell LP             |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>       |   | <b>1</b> Total pages Schedule A1:<br>Sch: 81/95 Rpt: 84/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                              |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/10/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Snell, Barry<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78209 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00         |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Lawyer |   | <b>9</b> Employer (See Instructions)<br>Snell & Snell LP    |
| Date<br>10/10/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Snell, Barry<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78209                   | Amount of Contribution (\$)<br><br>\$50.00                  |
| Principal occupation / Job title (See Instructions)<br>Lawyer          |   | Employer (See Instructions)<br>Snell & Snell LP             |
| Date<br>09/27/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Spain, Diana<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78751                        | Amount of Contribution (\$)<br><br>\$2.08                   |
| Principal occupation / Job title (See Instructions)<br>Not Employed    |   | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/26/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Spain, Diana<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78751                        | Amount of Contribution (\$)<br><br>\$2.08                   |
| Principal occupation / Job title (See Instructions)<br>Not Employed    |   | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/21/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Sparlin, Viktoria<br><hr/> Contributor address; City; State; Zip Code<br><br>Conway, AR 72034                   | Amount of Contribution (\$)<br><br>\$5.00                   |
| Principal occupation / Job title (See Instructions)<br>Not Employed    |   | Employer (See Instructions)<br>Not Employed                 |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>                   |  | <b>1</b> Total pages Schedule A1:<br>Sch: 82/95 Rpt: 85/157    |
| <b>2</b> FILER NAME<br>Carranza, Kristian  |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920       |
| <b>4</b> Date<br>10/18/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Spear, Caleb<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Richardson, TX 75082 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00            |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Regional Organizer |  | <b>9</b> Employer (See Instructions)<br>Battleground Texas     |
| Date<br>10/03/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Speegle, John<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antoino, TX 78209                 | Amount of Contribution (\$)<br><br>\$100.00                    |
| Principal occupation / Job title (See Instructions)<br>Architect                   |  | Employer (See Instructions)<br>Self                            |
| Date<br>10/17/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Stekler, Paul<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78704                      | Amount of Contribution (\$)<br><br>\$250.00                    |
| Principal occupation / Job title (See Instructions)<br>Not Employed                |  | Employer (See Instructions)<br>Not Employed                    |
| Date<br>10/16/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Stewart, Jeffrey<br><hr/> Contributor address; City; State; Zip Code<br><br>Saginaw, TX 76179                  | Amount of Contribution (\$)<br><br>\$25.00                     |
| Principal occupation / Job title (See Instructions)<br>Attorney                    |  | Employer (See Instructions)<br>Law Offices of Elizabeth Parmer |
| Date<br>10/10/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Stokes Hilton, Lee<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78735                 | Amount of Contribution (\$)<br><br>\$100.00                    |
| Principal occupation / Job title (See Instructions)<br>Not Employed                |  | Employer (See Instructions)<br>Not Employed                    |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>        |   | <b>1</b> Total pages Schedule A1:<br>Sch: 83/95 Rpt: 86/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                               |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/04/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Strickland, Joseph<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78751-3952 | <b>7</b> Amount of Contribution (\$)<br><br>\$100.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Owner   |   | <b>9</b> Employer (See Instructions)<br>More Home Slice     |
| Date<br>09/28/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Stromsness, Rune<br><hr/> Contributor address; City; State; Zip Code<br><br>Oakland, CA 94607                         | Amount of Contribution (\$)<br><br>\$9.09                   |
| Principal occupation / Job title (See Instructions)<br>IT Manager       |   | Employer (See Instructions)<br>University of California     |
| Date<br>09/27/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Stubblefield, Raymond<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77009                    | Amount of Contribution (\$)<br><br>\$100.00                 |
| Principal occupation / Job title (See Instructions)<br>Retired          |   | Employer (See Instructions)<br>Retired                      |
| Date<br>10/16/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Sumers, Kathleen<br><hr/> Contributor address; City; State; Zip Code<br><br>Los Angeles, CA 90068                     | Amount of Contribution (\$)<br><br>\$20.00                  |
| Principal occupation / Job title (See Instructions)<br>Not Employed     |   | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/13/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Suzman, Stephen<br><hr/> Contributor address; City; State; Zip Code<br><br>San Francisco, CA 94114                    | Amount of Contribution (\$)<br><br>\$100.00                 |
| Principal occupation / Job title (See Instructions)<br>Landscape Design |   | Employer (See Instructions)<br>Self Employed                |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>                   |  | <b>1</b> Total pages Schedule A1:<br>Sch: 84/95 Rpt: 87/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian  |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/07/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Swedler, David | <b>7</b> Amount of Contribution (\$)<br><br>\$2.50          |
| <b>6</b> Contributor address; City; State; Zip Code<br><br>Chicago, IL 60614       |  |   |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Healthcare analyst |  | <b>9</b> Employer (See Instructions)<br>MassHealth          |
| Date<br>10/04/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Taaffe, Peter           | Amount of Contribution (\$)<br><br>\$100.00                 |
| Contributor address; City; State; Zip Code<br><br>Houston, TX 77005                |  |   |
| Principal occupation / Job title (See Instructions)<br>CPA                         |  | Employer (See Instructions)<br>Taaffe & Associates          |
| Date<br>10/13/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Tanner, Louis           | Amount of Contribution (\$)<br><br>\$25.00                  |
| Contributor address; City; State; Zip Code<br><br>Austin, TX 78744                 |  |   |
| Principal occupation / Job title (See Instructions)<br>Not Employed                |  | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/14/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Tawil, Melanie          | Amount of Contribution (\$)<br><br>\$1,000.00               |
| Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78256            |  |   |
| Principal occupation / Job title (See Instructions)<br>Business Owner              |  | Employer (See Instructions)<br>SwipeTrack Solutions         |
| Date<br>09/30/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Taylor, Nicholas        | Amount of Contribution (\$)<br><br>\$50.00                  |
| Contributor address; City; State; Zip Code<br><br>South Pasadena, CA 91030-3221    |  |   |
| Principal occupation / Job title (See Instructions)<br>Not Employed                |  | Employer (See Instructions)<br>Not Employed                 |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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| <b>The Instruction Guide explains how to complete this form.</b> |   | <b>1</b> Total pages Schedule A1:<br>Sch: 85/95 Rpt: 88/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                        |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/02/2024                                      | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Texans for Insurance Reform PAC<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Manchaca, TX 78652 | <b>7</b> Amount of Contribution (\$)<br><br>\$75,000.00     |
| <b>8</b> Principal occupation / Job title (See Instructions)     |   | <b>9</b> Employer (See Instructions)                        |
| Date<br>10/04/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Texas American Federation of Teachers Cope Fund<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78741     | Amount of Contribution (\$)<br><br>\$5,000.00               |
| Principal occupation / Job title (See Instructions)              |   | Employer (See Instructions)                                 |
| Date<br>10/01/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Texas HDCC<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78703  | Amount of Contribution (\$)<br><br>\$25,000.00              |
| Principal occupation / Job title (See Instructions)              |   | Employer (See Instructions)                                 |
| Date<br>10/08/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Texas HDCC<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78703  | Amount of Contribution (\$)<br><br>\$25,000.00              |
| Principal occupation / Job title (See Instructions)              |   | Employer (See Instructions)                                 |
| Date<br>10/09/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Texas Parent PAC<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78703                                    | Amount of Contribution (\$)<br><br>\$2,500.00               |
| Principal occupation / Job title (See Instructions)              |   | Employer (See Instructions)                                 |



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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| <b>The Instruction Guide explains how to complete this form.</b>    |  | <b>1</b> Total pages Schedule A1:<br>Sch: 86/95 Rpt: 89/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                           |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/13/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Texas Sands PAC<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Austin, TX 78701        | <b>7</b> Amount of Contribution (\$)<br><br>\$25,000.00     |
| <b>8</b> Principal occupation / Job title (See Instructions)        |  | <b>9</b> Employer (See Instructions)                        |
| Date<br>09/27/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>The Law Offices of Meritz and Reddy<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78209 | Amount of Contribution (\$)<br><br>\$150.00                 |
| Principal occupation / Job title (See Instructions)<br>Attorney     |  | Employer (See Instructions)<br>Meritz Reddy PLLC            |
| Date<br>10/21/2024  | Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00716423 )<br>The Next 50<br><hr/> Contributor address; City; State; Zip Code<br><br>New York, NY 10021             | Amount of Contribution (\$)<br><br>\$2,500.00               |
| Principal occupation / Job title (See Instructions)                 |  | Employer (See Instructions)                                 |
| Date<br>10/12/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Thomas, Patricia<br><hr/> Contributor address; City; State; Zip Code<br><br>Washington, DC 20011                     | Amount of Contribution (\$)<br><br>\$2.27                   |
| Principal occupation / Job title (See Instructions)<br>Not Employed |  | Employer (See Instructions)<br>Not Employed                 |
| Date<br>09/27/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Thomason, Heidi<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78248                     | Amount of Contribution (\$)<br><br>\$30.00                  |
| Principal occupation / Job title (See Instructions)<br>Not Employed |  | Employer (See Instructions)<br>Not Employed                 |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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| <b>The Instruction Guide explains how to complete this form.</b>             |  | <b>1</b> Total pages Schedule A1:<br>Sch: 87/95 Rpt: 90/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                    |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/14/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Torrence, Christine<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78228 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00         |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed |  | <b>9</b> Employer (See Instructions)<br>Not Employed        |
| Date<br>10/02/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Torres, Tomas<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77027                             | Amount of Contribution (\$)<br><br>\$5,000.00               |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |  | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/09/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Townsend, Joyce<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78248                       | Amount of Contribution (\$)<br><br>\$100.00                 |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |  | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/03/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Turner, Chris<br><hr/> Contributor address; City; State; Zip Code<br><br>Grand Prairie, TX 75054                       | Amount of Contribution (\$)<br><br>\$5,000.00               |
| Principal occupation / Job title (See Instructions)<br>Campaign Account      |  | Employer (See Instructions)<br>Campaign Account             |
| Date<br>10/21/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Ulene, Richard<br><hr/> Contributor address; City; State; Zip Code<br><br>Mission Viejo, CA 92692-2414                 | Amount of Contribution (\$)<br><br>\$15.00                  |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |  | Employer (See Instructions)<br>Not Employed                 |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |   |   |
|---|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>                      |   | <b>1</b> Total pages Schedule A1:<br>Sch: 88/95 Rpt: 91/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian   |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/16/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Valdivia, Enrique    | <b>7</b> Amount of Contribution (\$) \$25.00                |
| <b>6</b> Contributor address; City; State; Zip Code<br><br>san antonio, TX 78201-4846 |   |   |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed          |   | <b>9</b> Employer (See Instructions)<br>Not Employed        |
| Date<br>10/15/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Vale, Theresa                 | Amount of Contribution (\$) \$50.00                         |
| Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78228               |   |   |
| Principal occupation / Job title (See Instructions)<br>Retired                        |   | Employer (See Instructions)<br>Retired                      |
| Date<br>10/07/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Van Horn Harris, Mary Frances | Amount of Contribution (\$) \$25.00                         |
| Contributor address; City; State; Zip Code<br><br>Cantonment, FL 32533                |   |   |
| Principal occupation / Job title (See Instructions)<br>Not Employed                   |   | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/17/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Van Horn Harris, Mary Frances | Amount of Contribution (\$) \$20.00                         |
| Contributor address; City; State; Zip Code<br><br>Cantonment, FL 32533-8267           |   |   |
| Principal occupation / Job title (See Instructions)<br>Not Employed                   |   | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/03/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Vance, Mike                   | Amount of Contribution (\$) \$25.00                         |
| Contributor address; City; State; Zip Code<br><br>Fayetteville, TX 78940              |   |   |
| Principal occupation / Job title (See Instructions)<br>Writer                         |   | Employer (See Instructions)<br>Self                         |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |  |  |
|--|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>               |  | 1 Total pages Schedule A1:<br>Sch: 89/95 Rpt: 92/157 |
| 2 FILER NAME<br>Carranza, Kristian   |  | 3 Filer ID (Ethics Commission Filers)<br>00087920    |
| 4 Date<br>10/25/2024   | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Vares, Laura     | 7 Amount of Contribution (\$)<br><br>\$10.00         |
|  | 6 Contributor address; City; State; Zip Code<br><br>Warwick, RI 02886                                  |  |
| 8 Principal occupation / Job title (See Instructions)<br>Not Employed          |  | 9 Employer (See Instructions)<br>Not Employed        |
| Date<br>10/24/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Vasquez, Alice     | Amount of Contribution (\$)<br><br>\$15.00           |
|  | Contributor address; City; State; Zip Code<br><br>New Braunfels, TX 78132                              |  |
| Principal occupation / Job title (See Instructions)<br>Customer Representative |  | Employer (See Instructions)<br>Ibex                  |
| Date<br>09/28/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Villarreal, Helen  | Amount of Contribution (\$)<br><br>\$9.00            |
|  | Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78214                                |  |
| Principal occupation / Job title (See Instructions)<br>Not Employed            |  | Employer (See Instructions)<br>Not Employed          |
| Date<br>10/21/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Vilvaray, Balaji   | Amount of Contribution (\$)<br><br>\$10.00           |
|  | Contributor address; City; State; Zip Code<br><br>Frisco, TX 75034                                     |  |
| Principal occupation / Job title (See Instructions)<br>o9                      |  | Employer (See Instructions)<br>Director              |
| Date<br>10/24/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Waddell, Elizabeth | Amount of Contribution (\$)<br><br>\$50.00           |
|  | Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78006                                |  |
| Principal occupation / Job title (See Instructions)<br>Not Employed            |  | Employer (See Instructions)<br>Not Employed          |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |   |   |
|--|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>             |   | <b>1</b> Total pages Schedule A1:<br>Sch: 90/95 Rpt: 93/157       |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                    |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920          |
| <b>4</b> Date<br>10/19/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Waldman, Rebecca<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78212 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00               |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed |   | <b>9</b> Employer (See Instructions)<br>Not Employed              |
| Date<br>10/14/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Walker, Christopher<br><hr/> Contributor address; City; State; Zip Code<br><br>Port Matilda, PA 16870               | Amount of Contribution (\$)<br><br>\$25.00                        |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |   | Employer (See Instructions)<br>Not Employed                       |
| Date<br>09/28/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Walmus, Adam<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78759-7329                       | Amount of Contribution (\$)<br><br>\$20.00                        |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |   | Employer (See Instructions)<br>Not Employed                       |
| Date<br>10/16/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Walsh, John<br><hr/> Contributor address; City; State; Zip Code<br><br>Washington, DC 20016                         | Amount of Contribution (\$)<br><br>\$6.25                         |
| Principal occupation / Job title (See Instructions)<br>Researcher            |   | Employer (See Instructions)<br>Washington Office on Latin America |
| Date<br>10/26/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Ward, M<br><hr/> Contributor address; City; State; Zip Code<br><br>Pflugerville, TX 78660                           | Amount of Contribution (\$)<br><br>\$4.17                         |
| Principal occupation / Job title (See Instructions)<br>RN                    |   | Employer (See Instructions)<br>Ascension                          |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |   |  |
|--|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>           |   | <b>1</b> Total pages Schedule A1:<br>Sch: 91/95 Rpt: 94/157          |
| <b>2</b> FILER NAME<br>Carranza, Kristian                                  |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920             |
| <b>4</b> Date<br>10/09/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Warren, Judith<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>College Station, TX 77840 | <b>7</b> Amount of Contribution (\$)<br><br>\$50.00                  |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Professor  |   | <b>9</b> Employer (See Instructions)<br>Texas A&M AgriLife Extension |
| Date<br>10/25/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Warren, Luke<br><hr/> Contributor address; City; State; Zip Code<br><br>Washington, DC 20002                          | Amount of Contribution (\$)<br><br>\$10.00                           |
| Principal occupation / Job title (See Instructions)<br>Board Game Licensor |   | Employer (See Instructions)<br>Self Employed                         |
| Date<br>10/16/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Watson, Taylor<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78209                       | Amount of Contribution (\$)<br><br>\$15.00                           |
| Principal occupation / Job title (See Instructions)<br>Consultant          |   | Employer (See Instructions)<br>Taylor Watson                         |
| Date<br>10/26/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Webster, Michael<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77030                         | Amount of Contribution (\$)<br><br>\$250.00                          |
| Principal occupation / Job title (See Instructions)<br>Musician/Professor  |   | Employer (See Instructions)<br>Rice University                       |
| Date<br>09/30/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Welsh, Eric<br><hr/> Contributor address; City; State; Zip Code<br><br>Harvard, MA 01451                              | Amount of Contribution (\$)<br><br>\$10.00                           |
| Principal occupation / Job title (See Instructions)<br>Software Developer  |   | Employer (See Instructions)<br>Eric Welsh                            |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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|--|--|---|
| <b>The Instruction Guide explains how to complete this form.</b>                 |  | <b>1</b> Total pages Schedule A1:<br>Sch: 92/95 Rpt: 95/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian  |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>09/29/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Welsh, Michael<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Cockeysville, MD 21030 | <b>7</b> Amount of Contribution (\$)<br><br>\$1.00          |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Sales            |  | <b>9</b> Employer (See Instructions)<br>Salesforce          |
| Date<br>09/28/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Wheless, Rebecca<br><hr/> Contributor address; City; State; Zip Code<br><br>Lynnwood, WA 98036                     | Amount of Contribution (\$)<br><br>\$15.00                  |
| Principal occupation / Job title (See Instructions)<br>Circulation               |  | Employer (See Instructions)<br>Beacon Publishing            |
| Date<br>10/12/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>White, Bonnie<br><hr/> Contributor address; City; State; Zip Code<br><br>Galveston, TX 77554                       | Amount of Contribution (\$)<br><br>\$250.00                 |
| Principal occupation / Job title (See Instructions)<br>Not Employed              |  | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/02/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Wilson, Paul<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77005                          | Amount of Contribution (\$)<br><br>\$75.00                  |
| Principal occupation / Job title (See Instructions)<br>Not Employed              |  | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/07/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Wilson, Walter<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78210                    | Amount of Contribution (\$)<br><br>\$100.00                 |
| Principal occupation / Job title (See Instructions)<br>Political Science Faculty |  | Employer (See Instructions)<br>UTSA                         |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |  |   |
|---|--|---|
| <b>The Instruction Guide explains how to complete this form.</b>                      |  | <b>1</b> Total pages Schedule A1:<br>Sch: 93/95 Rpt: 96/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian   |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>09/28/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Wood, Raleigh<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78212 | <b>7</b> Amount of Contribution (\$)<br><br>\$100.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Forensic Psychologist |  | <b>9</b> Employer (See Instructions)<br>Self-employed       |
| Date<br>10/21/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Wood, Raleigh<br><hr/> Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78212                   | Amount of Contribution (\$)<br><br>\$250.00                 |
| Principal occupation / Job title (See Instructions)<br>Forensic Psychologist          |  | Employer (See Instructions)<br>Self-employed                |
| Date<br>10/05/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Woods, Diane<br><hr/> Contributor address; City; State; Zip Code<br><br>Universal City, TX 78148                 | Amount of Contribution (\$)<br><br>\$100.00                 |
| Principal occupation / Job title (See Instructions)<br>Not Employed                   |  | Employer (See Instructions)<br>Not Employed                 |
| Date<br>09/29/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Wu, Eugene<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77081                          | Amount of Contribution (\$)<br><br>\$1,000.00               |
| Principal occupation / Job title (See Instructions)<br>Attorney                       |  | Employer (See Instructions)<br>Self                         |
| Date<br>10/21/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Wynn, Anne<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78704                           | Amount of Contribution (\$)<br><br>\$15,000.00              |
| Principal occupation / Job title (See Instructions)<br>Self-employed                  |  | Employer (See Instructions)<br>Anne Elizabeth Wynn          |



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |   |   |
|---|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>        |   | <b>1</b> Total pages Schedule A1:<br>Sch: 94/95 Rpt: 97/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian                               |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>09/27/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Yao, Kelley<br>.....<br><b>6</b> Contributor address; City; State; Zip Code<br><br>Temple City, CA 91780 | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00         |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Analyst |   | <b>9</b> Employer (See Instructions)<br>Niagara Bottling    |
| Date<br>09/28/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Ybarra, DJ<br>.....<br>Contributor address; City; State; Zip Code<br><br>Houston, TX 77023                        | Amount of Contribution (\$)<br><br>\$500.00                 |
| Principal occupation / Job title (See Instructions)<br>Outreach         |   | Employer (See Instructions)<br>Harris County                |
| Date<br>10/04/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Yeager, Robert<br>.....<br>Contributor address; City; State; Zip Code<br><br>The Woodlands, TX 77380              | Amount of Contribution (\$)<br><br>\$10.00                  |
| Principal occupation / Job title (See Instructions)<br>Trainer          |   | Employer (See Instructions)<br>InterCom                     |
| Date<br>10/22/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Young, Karen<br>.....<br>Contributor address; City; State; Zip Code<br><br>Columbia, MD 21046                     | Amount of Contribution (\$)<br><br>\$1.00                   |
| Principal occupation / Job title (See Instructions)<br>Not Employed     |   | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/16/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Zaid, Shereen<br>.....<br>Contributor address; City; State; Zip Code<br><br>Washington, DC 20036                  | Amount of Contribution (\$)<br><br>\$200.00                 |
| Principal occupation / Job title (See Instructions)<br>Sr Director      |   | Employer (See Instructions)<br>NYC HHC                      |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |   |   |
|---|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>                  |   | <b>1</b> Total pages Schedule A1:<br>Sch: 95/95 Rpt: 98/157 |
| <b>2</b> FILER NAME<br>Carranza, Kristian   |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920    |
| <b>4</b> Date<br>10/09/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>walker-Walton, Tiffany<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Windcrest, TX 78239 | <b>7</b> Amount of Contribution (\$) \$10.00                |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Complaint Advisor |   | <b>9</b> Employer (See Instructions)<br>USAA                |
| Date<br>10/03/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>warner, david<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78731                               | Amount of Contribution (\$) \$100.00                        |
| Principal occupation / Job title (See Instructions)<br>Not Employed               |   | Employer (See Instructions)<br>Not Employed                 |
| Date<br>10/06/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>warner, david<br><hr/> Contributor address; City; State; Zip Code<br><br>Austin, TX 78731                               | Amount of Contribution (\$) \$100.00                        |
| Principal occupation / Job title (See Instructions)<br>Not Employed               |   | Employer (See Instructions)<br>Not Employed                 |

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

|   |  |  |   |
|---|--|--|---|
| <b>The Instruction Guide explains how to complete this form.</b>            |  | 1 Total pages Schedule A2:<br>Sch: 1/3 Rpt: 99/157           |   |
| 2 FILER NAME<br>Carranza, Kristian  |  | 3 Filer ID (Ethics Commission Filers)<br>00087920            |   |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS                       |  | \$   |   |
| 5 Date<br>10/01/2024  | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Annie's List                    | 8 Amount of contribution (\$)<br>\$720.00                    | 9 In-kind contribution description<br>Calltime Software                             |
|   | 7 Contributor address; City; State; Zip Code<br><br>Austin, TX 78703   |  |   |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)   |  | 11 Employer (FOR NON-JUDICIAL) (See instructions)            |   |
| 12 Contributor's principal occupation (FOR JUDICIAL)                        |  | 13 Contributor's job title (FOR JUDICIAL) (See instructions) |   |
| 14 Contributor's employer/law firm (FOR JUDICIAL)                           |  | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)  |   |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) |  |  |   |
| Date<br>10/26/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Everytown Demand a Seat PAC Texas | Amount of contribution (\$)<br>\$131.59                      | In-kind contribution description<br>Staff Time and Travel Expenses                  |
|   | Contributor address; City; State; Zip Code<br><br>New York, NY 10163   |  |   |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)      |  | Employer (FOR NON-JUDICIAL) (See instructions)               |   |
| Contributor's principal occupation (FOR JUDICIAL)                           |  | Contributor's job title (FOR JUDICIAL) (See instructions)    |   |
| Contributor's employer/law firm (FOR JUDICIAL)                              |  | Law firm of contributor's spouse (if any) (FOR JUDICIAL)     |   |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)    |  |  |   |
| Date<br>10/25/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Fair Shot for Texas Workers PAC   | Amount of contribution (\$)<br>\$38,368.03                   | In-kind contribution description<br>Canvassing, Direct Mail and Digital Advertising |
|   | Contributor address; City; State; Zip Code<br><br>Austin, TX 78701   |  |   |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)      |  | Employer (FOR NON-JUDICIAL) (See instructions)               |   |
| Contributor's principal occupation (FOR JUDICIAL)                           |  | Contributor's job title (FOR JUDICIAL) (See instructions)    |   |
| Contributor's employer/law firm (FOR JUDICIAL)                              |  | Law firm of contributor's spouse (if any) (FOR JUDICIAL)     |   |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)    |  |  |   |

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

|   |   |  |   |
|---|---|--|---|
| <b>The Instruction Guide explains how to complete this form.</b>            |   | 1 Total pages Schedule A2:<br>Sch: 2/3 Rpt: 100/157          |   |
| 2 FILER NAME<br>Carranza, Kristian  |   | 3 Filer ID (Ethics Commission Filers)<br>00087920            |   |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS                       |   | \$   |   |
| 5 Date<br>10/08/2024  | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Represent Texas            | 8 Amount of contribution (\$)<br>\$428.57                    | 9 In-kind contribution description<br>GOTV Rides to the Polls with RideShare2Vote |
|   | 7 Contributor address; City; State; Zip Code<br><br>Dallas, TX 75214  |  |   |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)   |   | 11 Employer (FOR NON-JUDICIAL) (See instructions)            |   |
| 12 Contributor's principal occupation (FOR JUDICIAL)                        |   | 13 Contributor's job title (FOR JUDICIAL) (See instructions) |   |
| 14 Contributor's employer/law firm (FOR JUDICIAL)                           |   | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)  |   |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) |   |  |   |
| Date<br>09/30/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Texas Democratic Party       | Amount of contribution (\$)<br>\$7,059.24                    | In-kind contribution description<br>Salary, Payroll Taxes and Insurance           |
|   | Contributor address; City; State; Zip Code<br><br>Austin, TX 78761  |  |   |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)      |   | Employer (FOR NON-JUDICIAL) (See instructions)               |   |
| Contributor's principal occupation (FOR JUDICIAL)                           |   | Contributor's job title (FOR JUDICIAL) (See instructions)    |   |
| Contributor's employer/law firm (FOR JUDICIAL)                              |   | Law firm of contributor's spouse (if any) (FOR JUDICIAL)     |   |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)    |   |  |   |
| Date<br>10/26/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Texas Organizing Project PAC | Amount of contribution (\$)<br>\$27,861.00                   | In-kind contribution description<br>Printing, Advertising and Staff Time          |
|   | Contributor address; City; State; Zip Code<br><br>San Antonio, TX 78212   |  |   |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)      |   | Employer (FOR NON-JUDICIAL) (See instructions)               |   |
| Contributor's principal occupation (FOR JUDICIAL)                           |   | Contributor's job title (FOR JUDICIAL) (See instructions)    |   |
| Contributor's employer/law firm (FOR JUDICIAL)                              |   | Law firm of contributor's spouse (if any) (FOR JUDICIAL)     |   |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)    |   |  |   |

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

|  |  |   |   |
|--|--|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>   |  | <b>1</b> Total pages Schedule A2:<br>Sch: 3/3 Rpt: 101/157                      |   |
| <b>2</b> FILER NAME<br>Carranza, Kristian  |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920                        |   |
| <b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS   |  | <b>\$</b>   |   |
| <b>5</b> Date<br>09/29/2024  | <b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Wu, Gene (The Honorable) | <b>8</b> Amount of contribution (\$)<br>\$350.00                                | <b>9</b> In-kind contribution description<br>Fundraiser Refreshments and Food |
|  | <b>7</b> Contributor address; City; State; Zip Code<br><br>Houston, TX 77081   | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. |   |
| <b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)<br>Texas State Representative |  | <b>11</b> Employer (FOR NON-JUDICIAL) (See instructions)<br>Texas               |   |
| <b>12</b> Contributor's principal occupation (FOR JUDICIAL)  |  | <b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions)             |   |
| <b>14</b> Contributor's employer/law firm (FOR JUDICIAL)   |  | <b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)              |   |
| <b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)                             |  |   |   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |   |  |
|---|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 1/55 Rpt: | <b>2</b> FILER NAME<br>Carranza, Kristian | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920 |
|---|---|--|

|                             |                                 |
|-----------------------------|---------------------------------|
| <b>4</b> Date<br>10/16/2024 | <b>5</b> Payee name<br>3D Signs |
|-----------------------------|---------------------------------|

|                                  |  |
|----------------------------------|--|
| <b>6</b> Amount (\$)<br>\$703.63 | <b>7</b> Payee address; City; State; Zip Code<br>8015 W 2nd St<br><br>Somerset, TX 78069 |
|----------------------------------|--|

|                                 |   |   |
|---------------------------------|---|---|
| <b>8</b> PURPOSE OF EXPENDITURE | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Printing Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outdoor Signs |
|---------------------------------|---|---|

|   |                             |               |             |
|---|-----------------------------|---------------|-------------|
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

|                    |                        |
|--------------------|------------------------|
| Date<br>10/22/2024 | Payee name<br>3D Signs |
|--------------------|------------------------|

|                         |   |
|-------------------------|---|
| Amount (\$)<br>\$400.00 | Payee address; City; State; Zip Code<br>8015 W 2nd St<br><br>Somerset, TX 78069 |
|-------------------------|---|

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|-------------------------------|--|---|
| <b>PURPOSE OF EXPENDITURE</b> | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>2 x 4 Signs |
|-------------------------------|--|---|

|  |                             |               |             |
|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

|                    |                        |
|--------------------|------------------------|
| Date<br>10/21/2024 | Payee name<br>7-ELEVEN |
|--------------------|------------------------|

|                        |   |
|------------------------|---|
| Amount (\$)<br>\$28.48 | Payee address; City; State; Zip Code<br>513 Pat Booker Rd<br><br>Universal City, TX 78148 |
|------------------------|---|

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|-------------------------------|---|--|
| <b>PURPOSE OF EXPENDITURE</b> | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel In District | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Transportation/Gas |
|-------------------------------|---|--|

|  |                             |               |             |
|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> 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.

|   |   |  |
|---|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 2/55 Rpt: | <b>2</b> FILER NAME<br>Carranza, Kristian | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920 |
|---|---|--|

|                             |                                      |
|-----------------------------|--------------------------------------|
| <b>4</b> Date<br>10/04/2024 | <b>5</b> Payee name<br>AHSA Property |
|-----------------------------|--------------------------------------|

|                                    |   |
|------------------------------------|---|
| <b>6</b> Amount (\$)<br>\$1,741.99 | <b>7</b> Payee address; City; State; Zip Code<br>2919 Sable Crossing<br><br>San Antonio, TX 78232 |
|------------------------------------|---|

|                                 |   |  |
|---------------------------------|---|--|
| <b>8</b> PURPOSE OF EXPENDITURE | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Rent |
|---------------------------------|---|--|

|   |                             |               |             |
|---|-----------------------------|---------------|-------------|
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

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|--------------------|--------------------|
| Date<br>10/25/2024 | Payee name<br>AT&T |
|--------------------|--------------------|

|                        |  |
|------------------------|--|
| Amount (\$)<br>\$55.53 | Payee address; City; State; Zip Code<br>208 S Akard St<br><br>Dallas, TX 75202 |
|------------------------|--|

|                               |   |  |
|-------------------------------|---|--|
| <b>PURPOSE OF EXPENDITURE</b> | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Phone Services |
|-------------------------------|---|--|

|  |                             |               |             |
|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

|                    |                       |
|--------------------|-----------------------|
| Date<br>09/29/2024 | Payee name<br>ActBlue |
|--------------------|-----------------------|

|                           |   |
|---------------------------|---|
| Amount (\$)<br>\$1,161.26 | Payee address; City; State; Zip Code<br>366 Summer St<br><br>Somerville, MA 02160 |
|---------------------------|---|

|                               |   |   |
|-------------------------------|---|---|
| <b>PURPOSE OF EXPENDITURE</b> | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Fundraising Service 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.

|   |   |   |
|---|---|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 3/55 Rpt:                 | <b>2</b> FILER NAME<br>Carranza, Kristian   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920  |
| <b>4</b> Date<br>09/30/2024   | <b>5</b> Payee name<br>ActBlue  |   |
| <b>6</b> Amount (\$)<br>\$77.43                                     | <b>7</b> Payee address; City; State; Zip Code<br>366 Summer St<br><br>Somerville, MA 02160                  |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Fundraising Service Fee |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>10/06/2024  | Payee name<br>ActBlue   |   |
| Amount (\$)<br>\$946.37   | Payee address; City; State; Zip Code<br>366 Summer St<br><br>Somerville, MA 02160                           |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Fundraising Service Fee |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>10/13/2024  | Payee name<br>ActBlue   |   |
| Amount (\$)<br>\$454.53   | Payee address; City; State; Zip Code<br>366 Summer St<br><br>Somerville, MA 02160                           |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Fundraising Service 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.

|  |   |   |
|--|---|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 4/55 Rpt:          | <b>2</b> FILER NAME<br>Carranza, Kristian   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920  |
| <b>4</b> Date<br>10/20/2024                                  | <b>5</b> Payee name<br>ActBlue  |   |
| <b>6</b> Amount (\$)<br>\$323.33                             | <b>7</b> Payee address; City; State; Zip Code<br>366 Summer St<br><br>Somerville, MA 02160                  |   |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Fundraising Service Fee |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>10/02/2024   | Payee name<br>Adobe, Inc  |   |
| Amount (\$)<br>\$24.89                                       | Payee address; City; State; Zip Code<br>345 Park Ave<br><br>San Jose, CA 95110                              |   |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Software                |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>10/09/2024   | Payee name<br>Adobe, Inc  |   |
| Amount (\$)<br>\$22.72                                       | Payee address; City; State; Zip Code<br>345 Park Ave<br><br>San Jose, CA 95110                              |   |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Software                |
| 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.

|  |  |   |
|--|--|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 5/55 Rpt:          | <b>2</b> FILER NAME<br>Carranza, Kristian  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920  |
| <b>4</b> Date<br>10/14/2024                                  | <b>5</b> Payee name<br>Alina Food Mart   |   |
| <b>6</b> Amount (\$)<br>\$8.14                               | <b>7</b> Payee address; City; State; Zip Code<br>4151 Pleasanton Rd<br><br>San Antonio, TX 78221 |   |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Refreshments             |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>10/11/2024   | Payee name<br>Amazon   |   |
| Amount (\$)<br>\$9.61  | Payee address; City; State; Zip Code<br>440 Terry Ave N<br><br>Seattle, WA 98109                 |   |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Address Labels for Correspondence |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>10/02/2024   | Payee name<br>Arjon's International Club   |   |
| Amount (\$)<br>\$1.00  | Payee address; City; State; Zip Code<br>8736 Tesoro Dr<br><br>San Antonio, TX 78217              |   |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Event                    |
| 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.

|  |  |  |
|--|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 6/55 Rpt:          | <b>2</b> FILER NAME<br>Carranza, Kristian  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920   |
| <b>4</b> Date<br>10/02/2024                                  | <b>5</b> Payee name<br>Arjon's International Club  |  |
| <b>6</b> Amount (\$)<br>\$43.50                              | <b>7</b> Payee address; City; State; Zip Code<br>8736 Tesoro Dr<br><br>San Antonio, TX 78217     |  |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Event |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>10/03/2024   | Payee name<br>Arjon's International Club   |  |
| Amount (\$)<br>\$12.00                                       | Payee address; City; State; Zip Code<br>8736 Tesoro Dr<br><br>San Antonio, TX 78217              |  |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Event |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>10/20/2024   | Payee name<br>B + B Smokehouse   |  |
| Amount (\$)<br>\$56.11                                       | Payee address; City; State; Zip Code<br>2619 Pleasanton Rd<br><br>San Antonio, TX 78221          |  |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Meal  |
| 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.

|  |  |   |
|--|--|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 7/55 Rpt:          | <b>2</b> FILER NAME<br>Carranza, Kristian  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920  |
| <b>4</b> Date<br>10/16/2024                                  | <b>5</b> Payee name<br>Berlin Rosen LLC  |   |
| <b>6</b> Amount (\$)<br>\$7,575.00                           | <b>7</b> Payee address; City; State; Zip Code<br>15 Maiden Ln<br><br>New York, NY 10038          |   |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Video Production      |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>09/27/2024   | Payee name<br>Bill Miller  |   |
| Amount (\$)<br>\$17.43                                       | Payee address; City; State; Zip Code<br>620 Division Ave<br><br>San Antonio, TX 78214            |   |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Meal         |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>10/25/2024   | Payee name<br>Black Rock Coffee  |   |
| Amount (\$)<br>\$6.12  | Payee address; City; State; Zip Code<br>13980 Nacogdoches<br><br>San Antonio, TX 78217           |   |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Refreshments |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

|   |   |  |
|---|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 8/55 Rpt: | <b>2</b> FILER NAME<br>Carranza, Kristian | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920 |
|---|---|--|

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| <b>4</b> Date<br>10/07/2024 | <b>5</b> Payee name<br>Blue Scout, LLC |
|-----------------------------|--|

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| <b>6</b> Amount (\$)<br>\$1,000.00 | <b>7</b> Payee address; City; State; Zip Code<br>2505 Royal Birkdale<br><br>Plano, TX 75025 |
|------------------------------------|---|

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|---------------------------------|---|--|
| <b>8</b> PURPOSE OF EXPENDITURE | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Email Fundraising/Consulting |
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| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date<br>10/08/2024 | Payee name<br>Blue Scout, LLC |
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| Amount (\$)<br>\$1,500.00 | Payee address; City; State; Zip Code<br>2505 Royal Birkdale<br><br>Plano, TX 75025 |
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|-------------------------------|---|--|
| <b>PURPOSE OF EXPENDITURE</b> | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Email Fundraising/Consulting |
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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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| Date<br>10/15/2024 | Payee name<br>Bowles, Cole |
|--------------------|----------------------------|

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| Amount (\$)<br>\$360.00 | Payee address; City; State; Zip Code<br>5881 East River Rd<br><br>Tucson, AZ 85750 |
|-------------------------|--|

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| <b>PURPOSE OF EXPENDITURE</b> | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Field Payroll |
|-------------------------------|--|---|

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|--|-----------------------------|---------------|-------------|
| 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.

|   |  |  |
|---|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 9/55 Rpt:                 | <b>2</b> FILER NAME<br>Carranza, Kristian  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920   |
| <b>4</b> Date<br>10/17/2024   | <b>5</b> Payee name<br>Burmester, Kieran   |  |
| <b>6</b> Amount (\$)<br>\$315.00                                    | <b>7</b> Payee address; City; State; Zip Code<br>122 Roy Smith #2237<br><br>San Antonio, TX 78215        |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Field Payroll      |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought                      Office held   |
| Date<br>10/25/2024  | Payee name<br>Burmester, Kieran  |  |
| Amount (\$)<br>\$435.85   | Payee address; City; State; Zip Code<br>122 Roy Smith #2237<br><br>San Antonio, TX 78215                 |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Field Payroll      |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought                      Office held   |
| Date<br>09/30/2024  | Payee name<br>Chevron  |  |
| Amount (\$)<br>\$15.59  | Payee address; City; State; Zip Code<br>8107 S Flores<br><br>San Antonio, TX 78221                       |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel In District            | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Transportation/Gas |
| 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.

|   |   |  |
|---|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 10/55 Rpt:                | <b>2</b> FILER NAME<br>Carranza, Kristian   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920   |
| <b>4</b> Date<br>10/02/2024   | <b>5</b> Payee name<br>Chevron  |  |
| <b>6</b> Amount (\$)<br>\$37.25                                     | <b>7</b> Payee address; City; State; Zip Code<br>1710 Austin Hwy<br><br>San Antonio, TX 78218 |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel In District | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Transportation/Gas |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>10/08/2024  | Payee name<br>Chevron   |  |
| Amount (\$)<br>\$18.21  | Payee address; City; State; Zip Code<br>8107 S Flores<br><br>San Antonio, TX 78221            |  |
| <b>PURPOSE OF EXPENDITURE</b>                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel In District | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Transportation/Gas |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>10/09/2024  | Payee name<br>Chevron   |  |
| Amount (\$)<br>\$17.38  | Payee address; City; State; Zip Code<br>8107 S Flores<br><br>San Antonio, TX 78221            |  |
| <b>PURPOSE OF EXPENDITURE</b>                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel In District | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Transportation/Gas |
| 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.

|  |   |  |
|--|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 11/55 Rpt: | <b>2</b> FILER NAME<br>Carranza, Kristian | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920 |
|--|---|--|

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| <b>4</b> Date<br>10/12/2024 | <b>5</b> Payee name<br>Chevron |
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| <b>6</b> Amount (\$)<br>\$7.07 | <b>7</b> Payee address; City; State; Zip Code<br>8107 S Flores<br><br>San Antonio, TX 78221 |
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| <b>8</b> PURPOSE OF EXPENDITURE | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Refreshments |
|---------------------------------|--|---|

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|---|-----------------------------|---------------|-------------|
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date<br>10/12/2024 | Payee name<br>Chevron |
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| Amount (\$)<br>\$25.99 | Payee address; City; State; Zip Code<br>8107 S Flores<br><br>San Antonio, TX 78221 |
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| <b>PURPOSE OF EXPENDITURE</b> | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel In District | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Transportation/Gas |
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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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| Date<br>10/16/2024 | Payee name<br>Chevron |
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| Amount (\$)<br>\$39.82 | Payee address; City; State; Zip Code<br>8107 S Flores<br><br>San Antonio, TX 78221 |
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| <b>PURPOSE OF EXPENDITURE</b> | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel In District | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Transportation/Gas |
|-------------------------------|---|--|

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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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# 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.

|   |  |   |
|---|--|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 12/55 Rpt:                | <b>2</b> FILER NAME<br>Carranza, Kristian  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920  |
| <b>4</b> Date<br>10/16/2024   | <b>5</b> Payee name<br>Chevron   |   |
| <b>6</b> Amount (\$)<br>\$6.69                                      | <b>7</b> Payee address; City; State; Zip Code<br>8107 S Flores<br><br>San Antonio, TX 78221      |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Refreshments |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought                      Office held  |
| Date<br>10/24/2024  | Payee name<br>Chevron  |   |
| Amount (\$)<br>\$17.65  | Payee address; City; State; Zip Code<br>3100 Pat Booker Rd<br><br>Universal City, TX 78148       |   |
| <b>PURPOSE OF EXPENDITURE</b>                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel In District    | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Transportation/Gas    |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought                      Office held  |
| Date<br>10/15/2024  | Payee name<br>Circle K   |   |
| Amount (\$)<br>\$8.26   | Payee address; City; State; Zip Code<br>15010 Judson Rd<br><br>San Antonio, TX 78247             |   |
| <b>PURPOSE OF EXPENDITURE</b>                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Refreshments |
| 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.

|  |  |   |
|--|--|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 13/55 Rpt:         | <b>2</b> FILER NAME<br>Carranza, Kristian  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920  |
| <b>4</b> Date<br>10/24/2024                                  | <b>5</b> Payee name<br>Circle K  |   |
| <b>6</b> Amount (\$)<br>\$16.04                              | <b>7</b> Payee address; City; State; Zip Code<br>15010 Judson Rd<br><br>San Antonio, TX 78247    |   |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Refreshments |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>10/25/2024   | Payee name<br>Circle K   |   |
| Amount (\$)<br>\$2.48  | Payee address; City; State; Zip Code<br>15010 Judson Rd<br><br>San Antonio, TX 78247             |   |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Refreshments |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>10/26/2024   | Payee name<br>Circle K   |   |
| Amount (\$)<br>\$4.29  | Payee address; City; State; Zip Code<br>15010 Judson Rd<br><br>San Antonio, TX 78247             |   |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Refreshments |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

|  |   |  |
|--|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 14/55 Rpt: | <b>2</b> FILER NAME<br>Carranza, Kristian | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920 |
|--|---|--|

|                             |                                 |
|-----------------------------|---------------------------------|
| <b>4</b> Date<br>10/26/2024 | <b>5</b> Payee name<br>Circle K |
|-----------------------------|---------------------------------|

|                                 |   |
|---------------------------------|---|
| <b>6</b> Amount (\$)<br>\$12.25 | <b>7</b> Payee address; City; State; Zip Code<br>15010 Judson Rd<br><br>San Antonio, TX 78247 |
|---------------------------------|---|

|                                 |  |   |
|---------------------------------|--|---|
| <b>8</b> PURPOSE OF EXPENDITURE | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Refreshments |
|---------------------------------|--|---|

|   |                             |               |             |
|---|-----------------------------|---------------|-------------|
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

|                    |                        |
|--------------------|------------------------|
| Date<br>10/26/2024 | Payee name<br>Circle K |
|--------------------|------------------------|

|                       |  |
|-----------------------|--|
| Amount (\$)<br>\$8.22 | Payee address; City; State; Zip Code<br>15010 Judson Rd<br><br>San Antonio, TX 78247 |
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| <b>PURPOSE OF EXPENDITURE</b> | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Refreshments |
|-------------------------------|--|---|

|  |                             |               |             |
|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

|                    |                                  |
|--------------------|----------------------------------|
| Date<br>10/01/2024 | Payee name<br>Conexion Political |
|--------------------|----------------------------------|

|                            |  |
|----------------------------|--|
| Amount (\$)<br>\$50,000.00 | Payee address; City; State; Zip Code<br>209 Peninsula Dr<br><br>Moneta, VA 24121 |
|----------------------------|--|

|                               |  |   |
|-------------------------------|--|---|
| <b>PURPOSE OF EXPENDITURE</b> | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Digital Advertising |
|-------------------------------|--|---|

|  |                             |               |             |
|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> 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.

|  |  |   |
|--|--|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 15/55 Rpt:         | <b>2</b> FILER NAME<br>Carranza, Kristian  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920  |
| <b>4</b> Date<br>10/05/2024                                  | <b>5</b> Payee name<br>Conexion Political  |   |
| <b>6</b> Amount (\$)<br>\$50,000.00                          | <b>7</b> Payee address; City; State; Zip Code<br>209 Peninsula Dr<br><br>Moneta, VA 24121      |   |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Digital Advertising |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>10/08/2024   | Payee name<br>Conexion Political   |   |
| Amount (\$)<br>\$18,435.60                                   | Payee address; City; State; Zip Code<br>209 Peninsula Dr<br><br>Moneta, VA 24121               |   |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Digital Advertising |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>10/10/2024   | Payee name<br>Conexion Political   |   |
| Amount (\$)<br>\$50,000.00                                   | Payee address; City; State; Zip Code<br>209 Peninsula Dr<br><br>Moneta, VA 24121               |   |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Digital Advertising |
| 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.

|          |   |  |   |               |   |
|----------|---|--|---|---------------|---|
| <b>1</b> | Total pages Schedule F1:<br>Sch: 16/55 Rpt: | <b>2</b>   | FILER NAME<br>Carranza, Kristian  | <b>3</b>      | Filer ID (Ethics Commission Filers)<br>00087920 |
| <b>4</b> | Date<br>10/18/2024                          | <b>5</b>   | Payee name<br>Conexion Political  |               |   |
| <b>6</b> | Amount (\$)<br>\$50,000.00                  | <b>7</b>   | Payee address; City; State; Zip Code<br>209 Peninsula Dr<br><br>Moneta, VA 24121  |               |   |
| <b>8</b> | <b>PURPOSE OF EXPENDITURE</b>               | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Digital Advertising |               |   |
| <b>9</b> |   | Complete <u>ONLY</u> if direct expenditure to benefit C/OH   | Candidate/Officeholder name   | Office sought | Office held                                     |
|          | Date<br>10/18/2024                          |  | Payee name<br>Conexion Political  |               |   |
|          | Amount (\$)<br>\$15,000.00                  |  | Payee address; City; State; Zip Code<br>209 Peninsula Dr<br><br>Moneta, VA 24121  |               |   |
|          | <b>PURPOSE OF EXPENDITURE</b>               | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Digital Advertising |               |   |
|          |   | Complete <u>ONLY</u> if direct expenditure to benefit C/OH   | Candidate/Officeholder name   | Office sought | Office held                                     |
|          | Date<br>10/25/2024                          |  | Payee name<br>Conexion Political  |               |   |
|          | Amount (\$)<br>\$105,000.00                 |  | Payee address; City; State; Zip Code<br>209 Peninsula Dr<br><br>Moneta, VA 24121  |               |   |
|          | <b>PURPOSE OF EXPENDITURE</b>               | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense           | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Digital Advertising |               |   |
|          |   | 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.

|  |   |  |
|--|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 17/55 Rpt: | <b>2</b> FILER NAME<br>Carranza, Kristian | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920 |
|--|---|--|

|                             |   |
|-----------------------------|---|
| <b>4</b> Date<br>10/22/2024 | <b>5</b> Payee name<br>Copeland, Elliot |
|-----------------------------|---|

|                                  |  |
|----------------------------------|--|
| <b>6</b> Amount (\$)<br>\$153.50 | <b>7</b> Payee address; City; State; Zip Code<br>3730 Hunters Trail<br><br>San Antonio, TX 78230 |
|----------------------------------|--|

|                                 |  |   |
|---------------------------------|--|---|
| <b>8</b> PURPOSE OF EXPENDITURE | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Field Payroll |
|---------------------------------|--|---|

|   |                             |               |             |
|---|-----------------------------|---------------|-------------|
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

|                    |                           |
|--------------------|---------------------------|
| Date<br>09/28/2024 | Payee name<br>CreditHuman |
|--------------------|---------------------------|

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|------------------------|--|
| Amount (\$)<br>\$12.00 | Payee address; City; State; Zip Code<br>PO Box 1356<br><br>San Antonio, TX 78295 |
|------------------------|--|

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|------------------------|--|---|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule)<br>Accounting/Banking | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Bank Fee |
|------------------------|--|---|

|  |                             |               |             |
|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

|                    |                           |
|--------------------|---------------------------|
| Date<br>10/01/2024 | Payee name<br>CreditHuman |
|--------------------|---------------------------|

|                        |  |
|------------------------|--|
| Amount (\$)<br>\$12.00 | Payee address; City; State; Zip Code<br>PO Box 1356<br><br>San Antonio, TX 78295 |
|------------------------|--|

|                        |  |   |
|------------------------|--|---|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule)<br>Accounting/Banking | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Bank Fee |
|------------------------|--|---|

|  |                             |               |             |
|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> 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.

|  |   |  |
|--|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 18/55 Rpt:         | <b>2</b> FILER NAME<br>Carranza, Kristian   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920   |
| <b>4</b> Date<br>10/05/2024                                  | <b>5</b> Payee name<br>CreditHuman  |  |
| <b>6</b> Amount (\$)<br>\$12.00                              | <b>7</b> Payee address; City; State; Zip Code<br>PO Box 1356<br><br>San Antonio, TX 78295     |  |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Bank Fee |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>10/05/2024   | Payee name<br>CreditHuman   |  |
| Amount (\$)<br>\$12.00                                       | Payee address; City; State; Zip Code<br>PO Box 1356<br><br>San Antonio, TX 78295              |  |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Bank Fee |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>10/08/2024   | Payee name<br>CreditHuman   |  |
| Amount (\$)<br>\$12.00                                       | Payee address; City; State; Zip Code<br>PO Box 1356<br><br>San Antonio, TX 78295              |  |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Bank Fee |
| 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.

|  |   |  |
|--|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 19/55 Rpt:         | <b>2</b> FILER NAME<br>Carranza, Kristian   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920   |
| <b>4</b> Date<br>10/10/2024                                  | <b>5</b> Payee name<br>CreditHuman  |  |
| <b>6</b> Amount (\$)<br>\$15.00                              | <b>7</b> Payee address; City; State; Zip Code<br>PO Box 1356<br><br>San Antonio, TX 78295     |  |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Bank Fee |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>10/10/2024   | Payee name<br>CreditHuman   |  |
| Amount (\$)<br>\$15.00                                       | Payee address; City; State; Zip Code<br>PO Box 1356<br><br>San Antonio, TX 78295              |  |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Bank Fee |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>10/10/2024   | Payee name<br>CreditHuman   |  |
| Amount (\$)<br>\$15.00                                       | Payee address; City; State; Zip Code<br>PO Box 1356<br><br>San Antonio, TX 78295              |  |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Bank Fee |
| 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.

|   |   |  |
|---|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 20/55 Rpt:                | <b>2</b> FILER NAME<br>Carranza, Kristian   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920   |
| <b>4</b> Date<br>10/10/2024   | <b>5</b> Payee name<br>CreditHuman  |  |
| <b>6</b> Amount (\$)<br>\$15.00                                     | <b>7</b> Payee address; City; State; Zip Code<br>PO Box 1356<br><br>San Antonio, TX 78295     |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Bank Fee |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought                      Office held   |
| Date<br>10/16/2024  | Payee name<br>CreditHuman   |  |
| Amount (\$)<br>\$15.00  | Payee address; City; State; Zip Code<br>PO Box 1356<br><br>San Antonio, TX 78295              |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Bank Fee |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought                      Office held   |
| Date<br>10/18/2024  | Payee name<br>CreditHuman   |  |
| Amount (\$)<br>\$15.00  | Payee address; City; State; Zip Code<br>PO Box 1356<br><br>San Antonio, TX 78295              |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>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.

|  |   |  |
|--|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 21/55 Rpt:         | <b>2</b> FILER NAME<br>Carranza, Kristian   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920   |
| <b>4</b> Date<br>10/18/2024                                  | <b>5</b> Payee name<br>CreditHuman  |  |
| <b>6</b> Amount (\$)<br>\$12.00                              | <b>7</b> Payee address; City; State; Zip Code<br>PO Box 1356<br><br>San Antonio, TX 78295     |  |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Bank Fee |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>10/18/2024   | Payee name<br>CreditHuman   |  |
| Amount (\$)<br>\$12.00                                       | Payee address; City; State; Zip Code<br>PO Box 1356<br><br>San Antonio, TX 78295              |  |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Bank Fee |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>10/18/2024   | Payee name<br>CreditHuman   |  |
| Amount (\$)<br>\$12.00                                       | Payee address; City; State; Zip Code<br>PO Box 1356<br><br>San Antonio, TX 78295              |  |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Bank Fee |
| 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.

|  |   |  |
|--|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 22/55 Rpt:         | <b>2</b> FILER NAME<br>Carranza, Kristian   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920   |
| <b>4</b> Date<br>10/19/2024                                  | <b>5</b> Payee name<br>CreditHuman  |  |
| <b>6</b> Amount (\$)<br>\$12.00                              | <b>7</b> Payee address; City; State; Zip Code<br>PO Box 1356<br><br>San Antonio, TX 78295     |  |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Bank Fee |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>10/25/2024   | Payee name<br>CreditHuman   |  |
| Amount (\$)<br>\$12.00                                       | Payee address; City; State; Zip Code<br>PO Box 1356<br><br>San Antonio, TX 78295              |  |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Bank Fee |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>10/25/2024   | Payee name<br>CreditHuman   |  |
| Amount (\$)<br>\$12.00                                       | Payee address; City; State; Zip Code<br>PO Box 1356<br><br>San Antonio, TX 78295              |  |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Bank Fee |
| 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.

|  |   |   |
|--|---|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 23/55 Rpt:         | <b>2</b> FILER NAME<br>Carranza, Kristian   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920  |
| <b>4</b> Date<br>10/10/2024                                  | <b>5</b> Payee name<br>Don Pedro  |   |
| <b>6</b> Amount (\$)<br>\$20.11                              | <b>7</b> Payee address; City; State; Zip Code<br>1526 SW Military Dr<br><br>San Antonio, TX 78221         |   |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense          | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Meal |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>10/24/2024   | Payee name<br>E23 Digital   |   |
| Amount (\$)<br>\$2,000.00                                    | Payee address; City; State; Zip Code<br>490 Lake Park Avenue #16044<br><br>Oakland, CA 94610              |   |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Web Design    |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>10/19/2024   | Payee name<br>El Farolito   |   |
| Amount (\$)<br>\$16.50                                       | Payee address; City; State; Zip Code<br>2409 Commercial Ave<br><br>San Antonio, TX 78221                  |   |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense          | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Meal |
| 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.

|  |  |   |
|--|--|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 24/55 Rpt:         | <b>2</b> FILER NAME<br>Carranza, Kristian  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920  |
| <b>4</b> Date<br>09/30/2024                                  | <b>5</b> Payee name<br>Fedex Office  |   |
| <b>6</b> Amount (\$)<br>\$10.00                              | <b>7</b> Payee address; City; State; Zip Code<br>7900 Legacy Drive<br><br>Plano, TX 75024        |   |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Printing Expense      | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Printing Services     |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>10/01/2024   | Payee name<br>Fedex Office   |   |
| Amount (\$)<br>\$3.64  | Payee address; City; State; Zip Code<br>7900 Legacy Drive<br><br>Plano, TX 75024                 |   |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Printing Expense      | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Printing Services     |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>10/16/2024   | Payee name<br>Flores C-Store   |   |
| Amount (\$)<br>\$18.65                                       | Payee address; City; State; Zip Code<br>8107 S Flores St<br><br>San Antonio, TX 78221            |   |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Refreshments |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

|  |  |  |
|--|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 25/55 Rpt:         | <b>2</b> FILER NAME<br>Carranza, Kristian  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920   |
| <b>4</b> Date<br>09/30/2024                                  | <b>5</b> Payee name<br>GMMB  |  |
| <b>6</b> Amount (\$)<br>\$139,628.00                         | <b>7</b> Payee address; City; State; Zip Code<br>3050 K St NW<br><br>Washington, DC 20007      |  |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Broadcast Ad Buy |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>10/07/2024   | Payee name<br>GMMB   |  |
| Amount (\$)<br>\$155,707.00                                  | Payee address; City; State; Zip Code<br>3050 K St NW<br><br>Washington, DC 20007               |  |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Broadcast Ad Buy |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>10/10/2024   | Payee name<br>GMMB   |  |
| Amount (\$)<br>\$175,508.00                                  | Payee address; City; State; Zip Code<br>3050 K St NW<br><br>Washington, DC 20007               |  |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Broadcast Ad Buy |
| 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.

|  |  |  |
|--|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 26/55 Rpt:         | <b>2</b> FILER NAME<br>Carranza, Kristian  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920   |
| <b>4</b> Date<br>10/18/2024                                  | <b>5</b> Payee name<br>GMMB  |  |
| <b>6</b> Amount (\$)<br>\$186,048.00                         | <b>7</b> Payee address; City; State; Zip Code<br>3050 K St NW<br><br>Washington, DC 20007      |  |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Broadcast Ad Buy |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>10/18/2024   | Payee name<br>GMMB   |  |
| Amount (\$)<br>\$23,947.00                                   | Payee address; City; State; Zip Code<br>3050 K St NW<br><br>Washington, DC 20007               |  |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Broadcast Ad Buy |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>10/25/2024   | Payee name<br>GMMB   |  |
| Amount (\$)<br>\$321,995.00                                  | Payee address; City; State; Zip Code<br>3050 K St NW<br><br>Washington, DC 20007               |  |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Broadcast Ad Buy |
| 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.

|  |   |   |
|--|---|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 27/55 Rpt:         | <b>2</b> FILER NAME<br>Carranza, Kristian   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920  |
| <b>4</b> Date<br>10/01/2024                                  | <b>5</b> Payee name<br>Google Domains   |   |
| <b>6</b> Amount (\$)<br>\$38.38                              | <b>7</b> Payee address; City; State; Zip Code<br>1600 Amphitheatre Parkway<br><br>Mountain View, CA 94043 |   |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Domain Name + Email |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>10/08/2024   | Payee name<br>Gregory, Gabrien  |   |
| Amount (\$)<br>\$282.80                                      | Payee address; City; State; Zip Code<br>PO Box 700293<br><br>San Antonio, TX 78270                        |   |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Field Payroll       |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>10/16/2024   | Payee name<br>Gregory, Gabrien  |   |
| Amount (\$)<br>\$223.10                                      | Payee address; City; State; Zip Code<br>PO Box 700293<br><br>San Antonio, TX 78270                        |   |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Field Payroll       |
| 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.

|  |   |  |
|--|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 28/55 Rpt: | <b>2</b> FILER NAME<br>Carranza, Kristian | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920 |
|--|---|--|

|                             |   |
|-----------------------------|---|
| <b>4</b> Date<br>10/26/2024 | <b>5</b> Payee name<br>Griff's Hamburgers |
|-----------------------------|---|

|                                 |  |
|---------------------------------|--|
| <b>6</b> Amount (\$)<br>\$21.30 | <b>7</b> Payee address; City; State; Zip Code<br>2418 Pleasanton Rd<br><br>San Antonio, TX 78221 |
|---------------------------------|--|

|                                 |  |   |
|---------------------------------|--|---|
| <b>8</b> PURPOSE OF EXPENDITURE | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Meal |
|---------------------------------|--|---|

|   |                             |               |             |
|---|-----------------------------|---------------|-------------|
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

|                    |                   |
|--------------------|-------------------|
| Date<br>10/10/2024 | Payee name<br>HEB |
|--------------------|-------------------|

|                       |  |
|-----------------------|--|
| Amount (\$)<br>\$2.13 | Payee address; City; State; Zip Code<br>735 SW Military<br><br>San Antonio, TX 78221 |
|-----------------------|--|

|                        |   |   |
|------------------------|---|---|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Refreshment |
|------------------------|---|---|

|  |                             |               |             |
|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

|                    |                   |
|--------------------|-------------------|
| Date<br>10/20/2024 | Payee name<br>HEB |
|--------------------|-------------------|

|                        |  |
|------------------------|--|
| Amount (\$)<br>\$86.35 | Payee address; City; State; Zip Code<br>735 SW Military<br><br>San Antonio, TX 78221 |
|------------------------|--|

|                        |   |  |
|------------------------|---|--|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Event Materials |
|------------------------|---|--|

|  |                             |               |             |
|--|-----------------------------|---------------|-------------|
| 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.

|   |  |  |
|---|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 29/55 Rpt:                | <b>2</b> FILER NAME<br>Carranza, Kristian  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920   |
| <b>4</b> Date<br>10/21/2024   | <b>5</b> Payee name<br>HEB   |  |
| <b>6</b> Amount (\$)<br>\$22.25                                     | <b>7</b> Payee address; City; State; Zip Code<br>735 SW Military<br><br>San Antonio, TX 78221    |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Event Refreshments |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought                      Office held   |
| Date<br>10/21/2024  | Payee name<br>HEB  |  |
| Amount (\$)<br>\$19.30  | Payee address; City; State; Zip Code<br>735 SW Military<br><br>San Antonio, TX 78221             |  |
| <b>PURPOSE OF EXPENDITURE</b>                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Event Refreshments |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought                      Office held   |
| Date<br>10/21/2024  | Payee name<br>HEB  |  |
| Amount (\$)<br>\$12.86  | Payee address; City; State; Zip Code<br>735 SW Military<br><br>San Antonio, TX 78221             |  |
| <b>PURPOSE OF EXPENDITURE</b>                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Event Refreshments |
| 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.

|  |   |  |
|--|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 30/55 Rpt:         | <b>2</b> FILER NAME<br>Carranza, Kristian   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920   |
| <b>4</b> Date<br>10/22/2024                                  | <b>5</b> Payee name<br>HEB  |  |
| <b>6</b> Amount (\$)<br>\$50.95                              | <b>7</b> Payee address; City; State; Zip Code<br>735 SW Military<br><br>San Antonio, TX 78221             |  |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Office Supplies    |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>10/26/2024   | Payee name<br>HEB   |  |
| Amount (\$)<br>\$30.09                                       | Payee address; City; State; Zip Code<br>735 SW Military<br><br>San Antonio, TX 78221                      |  |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel In District             | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Transportation/Gas |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>10/26/2024   | Payee name<br>HEB   |  |
| Amount (\$)<br>\$67.40                                       | Payee address; City; State; Zip Code<br>735 SW Military<br><br>San Antonio, TX 78221                      |  |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense          | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Event Supplies     |
| 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.

|  |   |   |
|--|---|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 31/55 Rpt:         | <b>2</b> FILER NAME<br>Carranza, Kristian   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920  |
| <b>4</b> Date<br>10/16/2024                                  | <b>5</b> Payee name<br>Harland Clarke   |   |
| <b>6</b> Amount (\$)<br>\$100.18                             | <b>7</b> Payee address; City; State; Zip Code<br>5800 Northwest Pkwy<br><br>San Antonio, TX 78249         |   |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Checks        |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>10/08/2024   | Payee name<br>Jaimes, Abel  |   |
| Amount (\$)<br>\$287.40                                      | Payee address; City; State; Zip Code<br>522 Dooley Rd<br><br>Fredricksburg, TX 78624                      |   |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Field Payroll |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>10/16/2024   | Payee name<br>Jaimes, Abel  |   |
| Amount (\$)<br>\$230.00                                      | Payee address; City; State; Zip Code<br>522 Dooley Rd<br><br>Fredricksburg, TX 78624                      |   |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Field Payroll |
| 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.

|  |  |  |
|--|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 32/55 Rpt:         | <b>2</b> FILER NAME<br>Carranza, Kristian  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920   |
| <b>4</b> Date<br>10/08/2024                                  | <b>5</b> Payee name<br>Little Taco Factory   |  |
| <b>6</b> Amount (\$)<br>\$11.50                              | <b>7</b> Payee address; City; State; Zip Code<br>1510 McCullough<br><br>San Antonio, TX 78212            |  |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense         | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Meal  |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>10/15/2024   | Payee name<br>Locke, Hudson  |  |
| Amount (\$)<br>\$96.00                                       | Payee address; City; State; Zip Code<br>13602 Bridgeview<br><br>San Antonio, TX 78247                    |  |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Field Payroll  |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>10/11/2024   | Payee name<br>Lyft Ride  |  |
| Amount (\$)<br>\$13.74                                       | Payee address; City; State; Zip Code<br>185 Berry St Ste 50<br><br>San Francisco, CA 94107               |  |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel In District            | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Transportation |
| 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.

|   |   |  |
|---|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 33/55 Rpt:                | <b>2</b> FILER NAME<br>Carranza, Kristian   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920   |
| <b>4</b> Date<br>10/12/2024   | <b>5</b> Payee name<br>Lyft Ride  |  |
| <b>6</b> Amount (\$)<br>\$3.25                                      | <b>7</b> Payee address; City; State; Zip Code<br>185 Berry St Ste 50<br><br>San Francisco, CA 94107 |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel In District       | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Transportation |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>10/19/2024  | Payee name<br>Lyft Ride   |  |
| Amount (\$)<br>\$18.85  | Payee address; City; State; Zip Code<br>185 Berry St Ste 50<br><br>San Francisco, CA 94107          |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel Out of District   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Transportation |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>10/19/2024  | Payee name<br>Lyft Ride   |  |
| Amount (\$)<br>\$15.86  | Payee address; City; State; Zip Code<br>185 Berry St Ste 50<br><br>San Francisco, CA 94107          |  |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel Out of District   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Transportation |
| 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.

|  |   |  |
|--|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 34/55 Rpt: | <b>2</b> FILER NAME<br>Carranza, Kristian | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920 |
|--|---|--|

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| <b>4</b> Date<br>10/20/2024 | <b>5</b> Payee name<br>Lyft Ride |
|-----------------------------|----------------------------------|

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|---------------------------------|---|
| <b>6</b> Amount (\$)<br>\$15.99 | <b>7</b> Payee address; City; State; Zip Code<br>185 Berry St Ste 50<br><br>San Francisco, CA 94107 |
|---------------------------------|---|

|                                 |   |  |
|---------------------------------|---|--|
| <b>8</b> PURPOSE OF EXPENDITURE | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel In District | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Transportation |
|---------------------------------|---|--|

|   |                             |               |             |
|---|-----------------------------|---------------|-------------|
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

|                    |                         |
|--------------------|-------------------------|
| Date<br>10/20/2024 | Payee name<br>Lyft Ride |
|--------------------|-------------------------|

|                        |  |
|------------------------|--|
| Amount (\$)<br>\$11.79 | Payee address; City; State; Zip Code<br>185 Berry St Ste 50<br><br>San Francisco, CA 94107 |
|------------------------|--|

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|------------------------|--|---|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule)<br>Travel In District | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Transportation |
|------------------------|--|---|

|  |                             |               |             |
|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

|                    |                         |
|--------------------|-------------------------|
| Date<br>10/21/2024 | Payee name<br>Lyft Ride |
|--------------------|-------------------------|

|                        |  |
|------------------------|--|
| Amount (\$)<br>\$17.99 | Payee address; City; State; Zip Code<br>185 Berry St Ste 50<br><br>San Francisco, CA 94107 |
|------------------------|--|

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|------------------------|--|---|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule)<br>Travel In District | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Transportation |
|------------------------|--|---|

|  |                             |               |             |
|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> 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.

|  |   |  |
|--|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 35/55 Rpt: | <b>2</b> FILER NAME<br>Carranza, Kristian | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920 |
|--|---|--|

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|-----------------------------|----------------------------------|
| <b>4</b> Date<br>10/22/2024 | <b>5</b> Payee name<br>Lyft Ride |
|-----------------------------|----------------------------------|

|                                 |   |
|---------------------------------|---|
| <b>6</b> Amount (\$)<br>\$25.29 | <b>7</b> Payee address; City; State; Zip Code<br>185 Berry St Ste 50<br><br>San Francisco, CA 94107 |
|---------------------------------|---|

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|---------------------------------|---|--|
| <b>8</b> PURPOSE OF EXPENDITURE | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel Out of District | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Transportation |
|---------------------------------|---|--|

|   |                             |               |             |
|---|-----------------------------|---------------|-------------|
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

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|--------------------|-------------------------|
| Date<br>10/23/2024 | Payee name<br>Lyft Ride |
|--------------------|-------------------------|

|                        |  |
|------------------------|--|
| Amount (\$)<br>\$19.93 | Payee address; City; State; Zip Code<br>185 Berry St Ste 50<br><br>San Francisco, CA 94107 |
|------------------------|--|

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|------------------------|--|---|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Transportation |
|------------------------|--|---|

|  |                             |               |             |
|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

|                    |                         |
|--------------------|-------------------------|
| Date<br>10/25/2024 | Payee name<br>Lyft Ride |
|--------------------|-------------------------|

|                        |  |
|------------------------|--|
| Amount (\$)<br>\$11.66 | Payee address; City; State; Zip Code<br>185 Berry St Ste 50<br><br>San Francisco, CA 94107 |
|------------------------|--|

|                        |  |   |
|------------------------|--|---|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule)<br>Travel In District | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Transportation |
|------------------------|--|---|

|  |                             |               |             |
|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> 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.

|  |  |  |
|--|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 36/55 Rpt:         | <b>2</b> FILER NAME<br>Carranza, Kristian  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920   |
| <b>4</b> Date<br>10/26/2024                                  | <b>5</b> Payee name<br>Lyft Ride   |  |
| <b>6</b> Amount (\$)<br>\$10.61                              | <b>7</b> Payee address; City; State; Zip Code<br>185 Berry St Ste 50<br><br>San Francisco, CA 94107  |  |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel In District        | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Transportation |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>10/13/2024   | Payee name<br>Mailchimp  |  |
| Amount (\$)<br>\$330.46                                      | Payee address; City; State; Zip Code<br>675 Ponce De Leon Ave Ne Suite 5000<br><br>Atlanta, GA 30308 |  |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense       | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Email Service  |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>09/27/2024   | Payee name<br>Map Political Communication  |  |
| Amount (\$)<br>\$16,469.35                                   | Payee address; City; State; Zip Code<br>2400 S 4th St<br><br>Austin, TX 78704                        |  |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense       | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Direct Mailers |
| 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.

|  |  |  |
|--|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 37/55 Rpt:         | <b>2</b> FILER NAME<br>Carranza, Kristian  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920   |
| <b>4</b> Date<br>10/04/2024                                  | <b>5</b> Payee name<br>Map Political Communication   |  |
| <b>6</b> Amount (\$)<br>\$25,257.66                          | <b>7</b> Payee address; City; State; Zip Code<br>2400 S 4th St<br><br>Austin, TX 78704         |  |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Direct Mailers |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>10/07/2024   | Payee name<br>Map Political Communication  |  |
| Amount (\$)<br>\$9,444.67                                    | Payee address; City; State; Zip Code<br>2400 S 4th St<br><br>Austin, TX 78704                  |  |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Direct Mailers |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>10/21/2024   | Payee name<br>Map Political Communication  |  |
| Amount (\$)<br>\$4,703.84                                    | Payee address; City; State; Zip Code<br>2400 S 4th St<br><br>Austin, TX 78704                  |  |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Direct Mailers |
| 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.

|  |   |   |
|--|---|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 38/55 Rpt:         | <b>2</b> FILER NAME<br>Carranza, Kristian   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920  |
| <b>4</b> Date<br>10/15/2024                                  | <b>5</b> Payee name<br>Meritz, Darren   |   |
| <b>6</b> Amount (\$)<br>\$500.00                             | <b>7</b> Payee address; City; State; Zip Code<br>11405 Whisper Valley<br><br>San Antonio, TX 78230          |   |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Consulting Expense               | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Finance Consulting  |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>10/24/2024   | Payee name<br>Mywarchest.com  |   |
| Amount (\$)<br>\$150.00                                      | Payee address; City; State; Zip Code<br>4200 Wisconsin Ave NE<br><br>Washington, DC 20016                   |   |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Fundraising Service |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>10/03/2024   | Payee name<br>Phillips, Tyler   |   |
| Amount (\$)<br>\$2,375.00                                    | Payee address; City; State; Zip Code<br>215 E Cevallos St Apt 243<br><br>San Antonio, TX 78204              |   |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor    | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Finance Payroll     |
| 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.

|   |  |   |
|---|--|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 39/55 Rpt:                | <b>2</b> FILER NAME<br>Carranza, Kristian  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920  |
| <b>4</b> Date<br>10/07/2024   | <b>5</b> Payee name<br>Phillips, Tyler   |   |
| <b>6</b> Amount (\$)<br>\$300.00                                    | <b>7</b> Payee address; City; State; Zip Code<br>215 E Cevallos St Apt 243<br><br>San Antonio, TX 78204  |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Finance Payroll   |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought                      Office held  |
| Date<br>10/17/2024  | Payee name<br>Phillips, Tyler  |   |
| Amount (\$)<br>\$2,375.00   | Payee address; City; State; Zip Code<br>215 E Cevallos St Apt 243<br><br>San Antonio, TX 78204           |   |
| <b>PURPOSE OF EXPENDITURE</b>                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Finance Payroll   |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought                      Office held  |
| Date<br>10/21/2024  | Payee name<br>Prestige Printing  |   |
| Amount (\$)<br>\$269.54   | Payee address; City; State; Zip Code<br>9 Burwood Lane<br><br>San Antonio, TX 78216                      |   |
| <b>PURPOSE OF EXPENDITURE</b>                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Printing Expense              | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Printing 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.

|   |  |   |
|---|--|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 40/55 Rpt:                | <b>2</b> FILER NAME<br>Carranza, Kristian  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920  |
| <b>4</b> Date<br>09/30/2024   | <b>5</b> Payee name<br>Prima Pasta Italian   |   |
| <b>6</b> Amount (\$)<br>\$84.20                                     | <b>7</b> Payee address; City; State; Zip Code<br>6811 Kirby Dr<br><br>Houston, TX 77030          |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Meal         |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>10/04/2024  | Payee name<br>Print With Me  |   |
| Amount (\$)<br>\$7.66   | Payee address; City; State; Zip Code<br>445 W Erie St<br><br>Chicago, IL 60654                   |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Printing Expense      | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Printing Services     |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>10/21/2024  | Payee name<br>QT   |   |
| Amount (\$)<br>\$11.72  | Payee address; City; State; Zip Code<br>9630 S Zarzamora<br><br>San Antonio, TX 78224            |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Refreshments |
| 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.

|  |   |   |
|--|---|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 41/55 Rpt:         | <b>2</b> FILER NAME<br>Carranza, Kristian   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920  |
| <b>4</b> Date<br>10/10/2024                                  | <b>5</b> Payee name<br>SOTX   |   |
| <b>6</b> Amount (\$)<br>\$25.00                              | <b>7</b> Payee address; City; State; Zip Code<br>3128 Sidney Brooks<br><br>San Antonio, TX 78235  |   |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By Candidate/Officeholder/Political Committee | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Event        |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>09/29/2024   | Payee name<br>Sayda Mitchell-Morales for East Central ISD School Board Trustee, District 4  |   |
| Amount (\$)<br>\$118.00                                      | Payee address; City; State; Zip Code<br>10434 Green Lake Dr<br><br>San Antonio, TX 78223  |   |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By Candidate/Officeholder/Political Committee | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Contribution |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>10/23/2024   | Payee name<br>Scale To Win  |   |
| Amount (\$)<br>\$1,950.04                                    | Payee address; City; State; Zip Code<br>13742 Harper Street<br><br>Santa Ana, CA 92703  |   |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Texting Services      |
| 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.

|  |  |  |
|--|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 42/55 Rpt:         | <b>2</b> FILER NAME<br>Carranza, Kristian  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920   |
| <b>4</b> Date<br>09/29/2024                                  | <b>5</b> Payee name<br>Shell Oil   |  |
| <b>6</b> Amount (\$)<br>\$23.97                              | <b>7</b> Payee address; City; State; Zip Code<br>2999 N Hwy 123 Bypass<br><br>Seguin, TX 78155 |  |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel In District  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Transportation/Gas |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>10/09/2024   | Payee name<br>Shell Oil  |  |
| Amount (\$)<br>\$34.15                                       | Payee address; City; State; Zip Code<br>527 W Cevallos<br><br>San Antonio, TX 78204            |  |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel In District  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Transportation/Gas |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held  |
| Date<br>10/12/2024   | Payee name<br>Shell Oil  |  |
| Amount (\$)<br>\$28.33                                       | Payee address; City; State; Zip Code<br>15311 Lookout Rd<br><br>Selma, TX 78154                |  |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel In District  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Transportation/Gas |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

|  |   |  |
|--|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 43/55 Rpt:         | <b>2</b> FILER NAME<br>Carranza, Kristian   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920   |
| <b>4</b> Date<br>10/26/2024                                  | <b>5</b> Payee name<br>Shell Oil  |  |
| <b>6</b> Amount (\$)<br>\$32.68                              | <b>7</b> Payee address; City; State; Zip Code<br>3319 Pleasanton Rd<br><br>San Antonio, TX 78221          |  |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel In District             | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Transportation/Gas |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>10/12/2024   | Payee name<br>Sonic Drive In  |  |
| Amount (\$)<br>\$13.07                                       | Payee address; City; State; Zip Code<br>16401 Nacogdoches<br><br>San Antonio, TX 78247                    |  |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense          | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Meal      |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>10/15/2024   | Payee name<br>Spectrum  |  |
| Amount (\$)<br>\$219.81                                      | Payee address; City; State; Zip Code<br>12238 Silicon Dr Ste 129<br><br>San Antonio, TX 78249             |  |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Internet           |
| 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.

|  |   |  |
|--|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 44/55 Rpt: | <b>2</b> FILER NAME<br>Carranza, Kristian | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920 |
|--|---|--|

|                             |   |
|-----------------------------|---|
| <b>4</b> Date<br>10/21/2024 | <b>5</b> Payee name<br>Squarespace Inc. |
|-----------------------------|---|

|                                 |  |
|---------------------------------|--|
| <b>6</b> Amount (\$)<br>\$10.72 | <b>7</b> Payee address; City; State; Zip Code<br>225 Varick St<br><br>New York, NY 10014 |
|---------------------------------|--|

|                                 |   |  |
|---------------------------------|---|--|
| <b>8</b> PURPOSE OF EXPENDITURE | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Web Hosting Platform |
|---------------------------------|---|--|

|   |                             |               |             |
|---|-----------------------------|---------------|-------------|
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

|                    |                               |
|--------------------|-------------------------------|
| Date<br>10/14/2024 | Payee name<br>Squarespace Inc |
|--------------------|-------------------------------|

|                        |   |
|------------------------|---|
| Amount (\$)<br>\$24.52 | Payee address; City; State; Zip Code<br>225 Varick St<br><br>New York, NY 10014 |
|------------------------|---|

|                               |   |  |
|-------------------------------|---|--|
| <b>PURPOSE OF EXPENDITURE</b> | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Web Hosting Platform |
|-------------------------------|---|--|

|  |                             |               |             |
|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

|                    |                                   |
|--------------------|-----------------------------------|
| Date<br>10/10/2024 | Payee name<br>St. Lawrence Church |
|--------------------|-----------------------------------|

|                         |  |
|-------------------------|--|
| Amount (\$)<br>\$200.00 | Payee address; City; State; Zip Code<br>236 E Petaluma Blvd<br><br>San Antonio, TX 78221 |
|-------------------------|--|

|                               |  |  |
|-------------------------------|--|--|
| <b>PURPOSE OF EXPENDITURE</b> | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Contribution |
|-------------------------------|--|--|

|  |                             |               |             |
|--|-----------------------------|---------------|-------------|
| 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.

|          |   |  |   |               |   |
|----------|---|--|---|---------------|---|
| <b>1</b> | Total pages Schedule F1:<br>Sch: 45/55 Rpt: | <b>2</b>   | FILER NAME<br>Carranza, Kristian  | <b>3</b>      | Filer ID (Ethics Commission Filers)<br>00087920 |
| <b>4</b> | Date<br>09/28/2024                          | <b>5</b>   | Payee name<br>Starbucks Store   |               |   |
| <b>6</b> | Amount (\$)<br>\$29.12                      | <b>7</b>   | Payee address; City; State; Zip Code<br>1935 SW Military<br><br>San Antonio, TX 78221   |               |   |
| <b>8</b> | <b>PURPOSE OF EXPENDITURE</b>               | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Refreshments |               |   |
| <b>9</b> |   | Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                       | Candidate/Officeholder name   | Office sought | Office held                                     |
|          | Date<br>10/09/2024                          |  | Payee name<br>Starbucks Store   |               |   |
|          | Amount (\$)<br>\$14.42                      |  | Payee address; City; State; Zip Code<br>1935 SW Military<br><br>San Antonio, TX 78221   |               |   |
|          | <b>PURPOSE OF EXPENDITURE</b>               | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Refreshments |               |   |
|          |   | Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                       | Candidate/Officeholder name   | Office sought | Office held                                     |
|          | Date<br>10/24/2024                          |  | Payee name<br>Starbucks Store   |               |   |
|          | Amount (\$)<br>\$18.16                      |  | Payee address; City; State; Zip Code<br>1935 SW Military<br><br>San Antonio, TX 78221   |               |   |
|          | <b>PURPOSE OF EXPENDITURE</b>               | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Refreshments |               |   |
|          |   | 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.

|   |  |   |
|---|--|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 46/55 Rpt:                | <b>2</b> FILER NAME<br>Carranza, Kristian  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920  |
| <b>4</b> Date<br>10/25/2024   | <b>5</b> Payee name<br>Starbucks Store   |   |
| <b>6</b> Amount (\$)<br>\$12.04                                     | <b>7</b> Payee address; City; State; Zip Code<br>1935 SW Military<br><br>San Antonio, TX 78221   |   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Refreshments |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>10/26/2024  | Payee name<br>Starbucks Store  |   |
| Amount (\$)<br>\$18.70  | Payee address; City; State; Zip Code<br>1935 SW Military<br><br>San Antonio, TX 78221            |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Refreshments |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>10/14/2024  | Payee name<br>Starbucks  |   |
| Amount (\$)<br>\$20.43  | Payee address; City; State; Zip Code<br>8151 Pat Booker Rd<br><br>San Antonio, TX 78233          |   |
| PURPOSE OF EXPENDITURE  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Refreshments |
| 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.

|  |  |   |
|--|--|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 47/55 Rpt:         | <b>2</b> FILER NAME<br>Carranza, Kristian  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920  |
| <b>4</b> Date<br>10/22/2024                                  | <b>5</b> Payee name<br>Starbucks   |   |
| <b>6</b> Amount (\$)<br>\$8.31                               | <b>7</b> Payee address; City; State; Zip Code<br>8151 Pat Booker Rd<br><br>Live Oak, TX 78233    |   |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Refreshments       |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>10/21/2024   | Payee name<br>Subway   |   |
| Amount (\$)<br>\$23.29                                       | Payee address; City; State; Zip Code<br>14084 Nacogdoches<br><br>San Antonio, TX 78247           |   |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Field Campaign Refreshments |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>10/21/2024   | Payee name<br>Subway   |   |
| Amount (\$)<br>\$2.70  | Payee address; City; State; Zip Code<br>14084 Nacogdoches<br><br>San Antonio, TX 78247           |   |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Field Campaign Refreshments |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

|          |   |  |   |               |   |  |
|----------|---|--|---|---------------|---|--|
| <b>1</b> | Total pages Schedule F1:<br>Sch: 48/55 Rpt: | <b>2</b>   | FILER NAME<br>Carranza, Kristian  | <b>3</b>      | Filer ID (Ethics Commission Filers)<br>00087920 |  |
| <b>4</b> | Date<br>10/21/2024                          | <b>5</b>   | Payee name<br>Subway  |               |   |  |
| <b>6</b> | Amount (\$)<br>\$1.93                       | <b>7</b>   | Payee address; City; State; Zip Code<br>14084 Nacogdoches<br><br>San Antonio, TX 78247  |               |   |  |
| <b>8</b> | <b>PURPOSE OF EXPENDITURE</b>               | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Field Campaign Refreshments |               |   |  |
| <b>9</b> |   | Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                       | Candidate/Officeholder name   | Office sought | Office held                                     |  |
|          | Date<br>10/23/2024                          |  | Payee name<br>Subway  |               |   |  |
|          | Amount (\$)<br>\$33.05                      |  | Payee address; City; State; Zip Code<br>14084 Nacogdoches<br><br>San Antonio, TX 78247  |               |   |  |
|          | <b>PURPOSE OF EXPENDITURE</b>               | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Field Campaign Refreshments |               |   |  |
|          |   | Complete <u>ONLY</u> if direct expenditure to benefit C/OH                                       | Candidate/Officeholder name   | Office sought | Office held                                     |  |
|          | Date<br>10/23/2024                          |  | Payee name<br>Subway  |               |   |  |
|          | Amount (\$)<br>\$4.42                       |  | Payee address; City; State; Zip Code<br>14084 Nacogdoches<br><br>San Antonio, TX 78247  |               |   |  |
|          | <b>PURPOSE OF EXPENDITURE</b>               | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Field Campaign Refreshments |               |   |  |
|          |   | 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.

|  |   |  |
|--|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 49/55 Rpt:         | <b>2</b> FILER NAME<br>Carranza, Kristian   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920   |
| <b>4</b> Date<br>10/08/2024                                  | <b>5</b> Payee name<br>Switchboard  |  |
| <b>6</b> Amount (\$)<br>\$71.03                              | <b>7</b> Payee address; City; State; Zip Code<br>2001 K St NW<br><br>Washington, DC 20006   |  |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Texting Software |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>10/22/2024   | Payee name<br>Taqueria la Tapatia   |  |
| Amount (\$)<br>\$8.90  | Payee address; City; State; Zip Code<br>6731 S Flores St<br><br>San Antonio, TX 78221   |  |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Meal    |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held  |
| Date<br>10/10/2024   | Payee name<br>Texas Democratic Party  |  |
| Amount (\$)<br>\$66,000.00                                   | Payee address; City; State; Zip Code<br>314 E Highland Mall Blvd<br><br>Austin, TX 78752  |  |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By Candidate/Officeholder/Political Committee | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Contribution     |
| 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.

|  |   |   |
|--|---|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 50/55 Rpt:         | <b>2</b> FILER NAME<br>Carranza, Kristian   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920  |
| <b>4</b> Date<br>10/21/2024                                  | <b>5</b> Payee name<br>Texas Democratic Party   |   |
| <b>6</b> Amount (\$)<br>\$40,000.00                          | <b>7</b> Payee address; City; State; Zip Code<br>314 E Highland Mall Blvd<br><br>Austin, TX 78752   |   |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By Candidate/Officeholder/Political Committee | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Contribution  |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>10/11/2024   | Payee name<br>Texas HDCC  |   |
| Amount (\$)<br>\$5,000.00                                    | Payee address; City; State; Zip Code<br>PO Box 300095<br><br>Austin, TX 78703   |   |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Polling Expense  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Polling       |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>09/29/2024   | Payee name<br>The Texan   |   |
| Amount (\$)<br>\$20.23                                       | Payee address; City; State; Zip Code<br>25 N Kessler<br><br>Schulenberg, TX 78956   |   |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Meal |
| 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.

|  |   |  |
|--|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 51/55 Rpt: | <b>2</b> FILER NAME<br>Carranza, Kristian | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920 |
|--|---|--|

|                             |                                       |
|-----------------------------|---------------------------------------|
| <b>4</b> Date<br>10/20/2024 | <b>5</b> Payee name<br>Threading Plus |
|-----------------------------|---------------------------------------|

|                                 |   |
|---------------------------------|---|
| <b>6</b> Amount (\$)<br>\$45.75 | <b>7</b> Payee address; City; State; Zip Code<br>2310 SW Military Dr<br><br>San Antonio, TX 78224 |
|---------------------------------|---|

|                                 |   |  |
|---------------------------------|---|--|
| <b>8</b> PURPOSE OF EXPENDITURE | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Solicitation/Fundraising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Event Prep |
|---------------------------------|---|--|

|   |                             |               |             |
|---|-----------------------------|---------------|-------------|
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

|                    |                                 |
|--------------------|---------------------------------|
| Date<br>10/01/2024 | Payee name<br>Tito's Restaurant |
|--------------------|---------------------------------|

|                        |   |
|------------------------|---|
| Amount (\$)<br>\$14.12 | Payee address; City; State; Zip Code<br>955 S Alamo St<br><br>San Antonio, TX 78205 |
|------------------------|---|

|                        |  |   |
|------------------------|--|---|
| PURPOSE OF EXPENDITURE | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Refreshments |
|------------------------|--|---|

|  |                             |               |             |
|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

|                    |                                 |
|--------------------|---------------------------------|
| Date<br>10/21/2024 | Payee name<br>Tito's Restaurant |
|--------------------|---------------------------------|

|                        |   |
|------------------------|---|
| Amount (\$)<br>\$60.85 | Payee address; City; State; Zip Code<br>955 S Alamo St<br><br>San Antonio, TX 78205 |
|------------------------|---|

|                        |  |   |
|------------------------|--|---|
| PURPOSE OF EXPENDITURE | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Refreshments |
|------------------------|--|---|

|  |                             |               |             |
|--|-----------------------------|---------------|-------------|
| 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.

|  |   |  |
|--|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 52/55 Rpt: | <b>2</b> FILER NAME<br>Carranza, Kristian | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920 |
|--|---|--|

|                             |  |
|-----------------------------|--|
| <b>4</b> Date<br>10/21/2024 | <b>5</b> Payee name<br>Tito's Restaurant |
|-----------------------------|--|

|                                 |  |
|---------------------------------|--|
| <b>6</b> Amount (\$)<br>\$50.06 | <b>7</b> Payee address; City; State; Zip Code<br>955 S Alamo St<br><br>San Antonio, TX 78205 |
|---------------------------------|--|

|                                 |  |   |
|---------------------------------|--|---|
| <b>8</b> PURPOSE OF EXPENDITURE | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Refreshments |
|---------------------------------|--|---|

|   |                             |               |             |
|---|-----------------------------|---------------|-------------|
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

|                    |  |
|--------------------|--|
| Date<br>10/17/2024 | Payee name<br>United States Postal Service |
|--------------------|--|

|                         |   |
|-------------------------|---|
| Amount (\$)<br>\$219.00 | Payee address; City; State; Zip Code<br>1140 S Laredo St<br><br>San Antonio, TX 78204 |
|-------------------------|---|

|                               |  |   |
|-------------------------------|--|---|
| <b>PURPOSE OF EXPENDITURE</b> | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Postage |
|-------------------------------|--|---|

|  |                             |               |             |
|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

|                    |  |
|--------------------|--|
| Date<br>10/19/2024 | Payee name<br>United States Postal Service |
|--------------------|--|

|                         |  |
|-------------------------|--|
| Amount (\$)<br>\$292.00 | Payee address; City; State; Zip Code<br>7411 Barlite Blvd<br><br>San Antonio, TX 78224 |
|-------------------------|--|

|                               |  |   |
|-------------------------------|--|---|
| <b>PURPOSE OF EXPENDITURE</b> | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>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.

|  |  |   |
|--|--|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 53/55 Rpt:         | <b>2</b> FILER NAME<br>Carranza, Kristian  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920  |
| <b>4</b> Date<br>10/10/2024                                  | <b>5</b> Payee name<br>Vaughn, Soren   |   |
| <b>6</b> Amount (\$)<br>\$648.50                             | <b>7</b> Payee address; City; State; Zip Code<br>315 Thorman PL<br><br>San Antonio, TX 78209             |   |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Field Payroll |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>10/18/2024   | Payee name<br>Vaughn, Soren  |   |
| Amount (\$)<br>\$448.50                                      | Payee address; City; State; Zip Code<br>315 Thorman PL<br><br>San Antonio, TX 78209                      |   |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Field Payroll |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name  | Office sought Office held   |
| Date<br>10/25/2024   | Payee name<br>Vaughn, Soren  |   |
| Amount (\$)<br>\$425.50                                      | Payee address; City; State; Zip Code<br>315 Thorman PL<br><br>San Antonio, TX 78209                      |   |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Field Payroll |
| 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.

|  |   |   |
|--|---|---|
| <b>1</b> Total pages Schedule F1:<br>Sch: 54/55 Rpt:         | <b>2</b> FILER NAME<br>Carranza, Kristian   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920  |
| <b>4</b> Date<br>10/11/2024                                  | <b>5</b> Payee name<br>WalMart  |   |
| <b>6</b> Amount (\$)<br>\$12.82                              | <b>7</b> Payee address; City; State; Zip Code<br>1200 SE Military<br><br>San Antonio, TX 78214            |   |
| <b>8</b> PURPOSE OF EXPENDITURE                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Office Supplies |
| <b>9</b> Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>10/15/2024   | Payee name<br>WalMart   |   |
| Amount (\$)<br>\$21.97                                       | Payee address; City; State; Zip Code<br>1200 SE Military<br><br>San Antonio, TX 78214                     |   |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Office Supplies |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name   | Office sought Office held   |
| Date<br>10/17/2024   | Payee name<br>WalMart   |   |
| Amount (\$)<br>\$18.38                                       | Payee address; City; State; Zip Code<br>1200 SE Military<br><br>San Antonio, TX 78214                     |   |
| PURPOSE OF EXPENDITURE                                       | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Office Supplies |
| 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  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Credit Card Payment  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

|  |   |  |
|--|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 55/55 Rpt: | <b>2</b> FILER NAME<br>Carranza, Kristian | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920 |
|--|---|--|

|                             |                                |
|-----------------------------|--------------------------------|
| <b>4</b> Date<br>10/19/2024 | <b>5</b> Payee name<br>WalMart |
|-----------------------------|--------------------------------|

|                                 |  |
|---------------------------------|--|
| <b>6</b> Amount (\$)<br>\$41.14 | <b>7</b> Payee address; City; State; Zip Code<br>1200 SE Military<br><br>San Antonio, TX 78214 |
|---------------------------------|--|

|                                 |   |   |
|---------------------------------|---|---|
| <b>8</b> PURPOSE OF EXPENDITURE | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Office Supplies |
|---------------------------------|---|---|

|   |                             |               |             |
|---|-----------------------------|---------------|-------------|
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

|                    |                       |
|--------------------|-----------------------|
| Date<br>10/20/2024 | Payee name<br>WalMart |
|--------------------|-----------------------|

|                         |   |
|-------------------------|---|
| Amount (\$)<br>\$219.75 | Payee address; City; State; Zip Code<br>1200 SE Military<br><br>San Antonio, TX 78214 |
|-------------------------|---|

|                               |   |  |
|-------------------------------|---|--|
| <b>PURPOSE OF EXPENDITURE</b> | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Field Supplies |
|-------------------------------|---|--|

|  |                             |               |             |
|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

|  |  |  |  |
|--|--|--|--|
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# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

|  |   |  |
|--|---|--|
| <b>The Instruction Guide explains how to complete this form.</b> |   | <b>1</b> Total pages Schedule K:<br>Sch: 1/1 Rpt: 157/157                  |
| <b>2</b> FILER NAME<br>Carranza, Kristian                        |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087920                   |
| <b>4</b> Date<br>09/30/2024                                      | <b>5</b> Name of person from whom amount is received<br>CreditHuman   | <b>8</b> Amount (\$)<br>\$20.63  |
|  | <b>6</b> Address of person from whom amount is received; City; State; Zip Code<br><br>San Antonio, TX 78295 |  |
|  | <b>7</b> Purpose for which amount is received<br>Interest/Dividend from checking account                    | <input type="checkbox"/> Check if political contribution returned to filer |