# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

|                               | Guide explains how to comple    | ete this form.     | 1 Filer ID<br>(Ethics Commis<br>00087920 |                   | 2 Total pages file 15      |                  |
|-------------------------------|---------------------------------|--------------------|--|-------------------|----------------------------|------------------|
| 3 CANDIDATE /<br>OFFICEHOLDER | MS / MRS / MR                   | FIRST<br>Kristian  |  | MI                |                            | ISE ONLY         |
| NAME                          |                                 | ·                  |  |                   | Date Received  ELECTRONICA | LLY FILED        |
|                               | NICKNAME                        | LAST               |  | SUFFIX            | 10/28/2024                 |                  |
|                               |                                 | Carranza           |  |                   |                            |                  |
| 4 CANDIDATE /<br>OFFICEHOLDER | ADDRESS / PO BOX; APT           | / SUITE #; CIT     | Υ;                                       | ZIP CODE          | Date Hand-delivered or     | Date Postmarked  |
| MAILING<br>ADDRESS            | P.O. Box 831436                 |                    |  |                   | Receipt #                  | Amount           |
| Change of Address             | San Antonio, TX 78283           |                    |  |                   | Date Processed             |                  |
|                               |                                 |                    |  |                   |                            |                  |
|                               |                                 |                    |  |                   | Date Imaged                |                  |
| 5 CAMPAIGN<br>TREASURER       | MS / MRS / MR                   | FIRST              |  | MI                | •                          |                  |
| NAME                          |                                 | Darren             |  |                   |                            |                  |
|                               | NICKNAME                        | LAST               |  | SUFFIX            |                            |                  |
|                               |                                 | Meritz             |  |                   |                            |                  |
| 6 CAMPAIGN                    | STREET ADDRESS (NO PO           | BOX PLEASE);       | AP                                       | / SUITE #; CITY;  | STA                        | TE; ZIP CODE     |
| TREASURER<br>ADDRESS          | P.O. Box 831436                 |                    |  |                   |                            |                  |
| (Residence or Business)       | San Antonio, TX 78283           |                    |  |                   |                            |                  |
|                               |                                 |                    |  |                   |                            |                  |
| 7 CAMPAIGN<br>TREASURER       | AREA CODE PHON                  | E NUMBER E         | EXTENSION                                |                   |                            |                  |
| PHONE                         | (915) 274-2501                  |                    |  |                   |                            |                  |
| 8 REPORT<br>TYPE              | January 15                      | 30th day before    | election                                 | Runoff            | 15th day after can         | npaign treasurer |
|                               |                                 |                    |  | Exceeded modified | appointment (office        | eholder only)    |
|                               | July 15 X                       | J our day before t | election                                 | reporting limit   | Final Report (Attac        | ui c/on-FR)      |
| 9 PERIOD<br>COVERED           | Month Day Year                  | TL                 | IROUGH                                   | Month Day         | Year                       |                  |
|                               | 09/27/2024                      | 117                | IKOOGH                                   | 10/26/202         | .4                         |                  |
| 10 ELECTION                   | ELECTION DATE<br>Month Day Year |                    | rimary                                   | ELECTION TYPE     | Othor                      |                  |
|                               | 11/05/2024                      |                    | -  |                   | Other                      |                  |
|                               |                                 | X X                | eneral                                   | Special           |                            |                  |
| 11 OFFICE                     | OFFICE HELD (if any)            |                    |  | 12 OFFICE SOUGHT  |                            |                  |
|                               |                                 |                    |  | State Represent   | ative District 118         |                  |
|                               | •                               |                    |  | •                 |                            |                  |
|                               |                                 | GO T               | O PAGE 2                                 |                   |                            |                  |

### CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

2 of 157

| 13 C / OH NAME  | Carranza, Kristian   |   | <b>14</b> Filer ID (E 00087920 | Ethics Commission Filers) |  |  |  |  |
|---|--|---|--------------------------------|---------------------------|--|--|--|--|
| 15 NOTICE<br>FROM<br>POLITICAL<br>COMMITTEE(S)  | candidate / officeholder.  | political contributions accepted or political expenditu<br>These expenditures may have been made without a<br>d officeholders are required to report this information | the candidate's or officel     | holder's knowledge or     |  |  |  |  |
| Additional Pages  | COMMITTEE TYPE   | COMMITTEE NAME  |                                |                           |  |  |  |  |
|   | GENERAL  |   |                                |                           |  |  |  |  |
|   |  | COMMITTEE ADDRESS   |                                |                           |  |  |  |  |
|   | SPECIFIC   |   |                                |                           |  |  |  |  |
|   |  | COMMITTEE CAMPAIGN TREASURER NAME   |                                |                           |  |  |  |  |
|   |  |   |                                |                           |  |  |  |  |
|   |  | COMMITTEE CAMPAIGN TREASURER ADDRES   | SS                             |                           |  |  |  |  |
| 16 CONTRIBUTION<br>TOTALS   |  | L<br>ZED POLITICAL CONTRIBUTIONS (OTHER THA<br>ES OF LOANS, OR CONTRIBUTIONS MADE ELE   |                                | \$ 0.00                   |  |  |  |  |
|   | \$ 1,619,637.14  |   |                                |                           |  |  |  |  |
| EXPENDITURE<br>TOTALS   |  | \$ 0.00   |                                |                           |  |  |  |  |
|   | 4. TOTAL POLITIC   | AL EXPENDITURES   |                                | <b>\$</b> 1,541,741.52    |  |  |  |  |
| CONTRIBUTION<br>BALANCE   | 5. TOTAL POLITIC<br>REPORTING PE   | AL CONTRIBUTIONS MAINTAINED AS OF THE L<br>RIOD   | AST DAY OF THE                 | \$ 190,928.62             |  |  |  |  |
| OUTSTANDING<br>LOAN TOTALS  | 6. TOTAL PRINCIF<br>OF THE REPOR   | AL AMOUNT OF ALL OUTSTANDING LOANS AS<br>TING PERIOD  | OF THE LAST DAY                | \$ 0.00                   |  |  |  |  |
| <b>17</b> AFFIDAVIT   |  | I swear, or affirm, under penalty<br>true and correct and includes a<br>under Title 15, Election Code.  |                                |                           |  |  |  |  |
|   |  | Kr  | istian Carranza                |                           |  |  |  |  |
|   |  | Signature of  | Candidate or Officehold        | ler                       |  |  |  |  |
| AFFIX NO  | TARY STAMP / SEAL AB   | DVE   |                                |                           |  |  |  |  |
| Sworn to and subs   | cribed before me, by the s   | aid   | , this the                     | day                       |  |  |  |  |
| Sworn to and subscribed before me, by the said, this the, this the, of, 20, to certify which, witness my hand and seal of office. |  |   |                                |                           |  |  |  |  |
| Signature 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**

|    |                     |  |                             |      | 3 of 157                |
|----|---------------------|--|-----------------------------|------|-------------------------|
| _  | LER NAM<br>arranza, | ME<br>, Kristian   | <b>19</b> Filer ID 00087920 | (Eth | nics Commission Filers) |
|    |                     | E SUBTOTALS<br>SCHEDULE  |                             |      | SUBTOTAL AMOUNT         |
| 1. | X                   | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                                  |                             | \$   | 1,544,718.71            |
| 2. | Х                   | \$   | 74,918.43                   |      |                         |
| 3. |                     | \$   |                             |      |                         |
| 4. |                     | \$   |                             |      |                         |
| 5. | Х                   | \$   | 1,541,741.52                |      |                         |
| 6. |                     | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS                                       |                             | \$   |                         |
| 7. |                     | SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION               | ONS                         | \$   |                         |
| 8. |                     | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                                  |                             | \$   |                         |
| 9. |                     | SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS                         |                             | \$   |                         |
| 10 | . 🗆                 | SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS                 | OF C/OH                     | \$   |                         |
| 11 | . 🗆                 | SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION             | ONS                         | \$   |                         |
| 12 | . X                 | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F<br>TO FILER | RETURNED                    | \$   | 20.63                   |
|    |                     |  |                             |      |                         |

|   | MONET                      | ARY POLITICAL CONTRIBU  | IS      |   | SCHEDUL  | E <b>A1</b>                                      |           |
|---|----------------------------|---|---------|---|----------|--|-----------|
|   | The Instruc                | ction Guide explains how to complete th   | nis for | m.                                      | 1        | Total pages Schedule A1:<br>Sch: 1/95 Rpt: 4/157 |           |
| 2 | FILER NAME<br>Carranza, Kr | istian  |         |   | 3        | Filer ID (Ethics Commissio 00087920              | n Filers) |
| 4 | Date 09/27/2024            | <ul> <li>Full name of contributor</li></ul>   | (ID#:   |   | 7        | Amount of Contribution (\$)                      | \$5.00    |
| 8 | Principal occu             | Colleyville, TX 76034 pation / Job title (See Instructions)   | 9       | Employer (See Instructions              | <br>s)   |  |           |
|   | Not Employe                | ed  |         | Not Employed                            |          |  |           |
|   | Date<br>10/01/2024         | Contributor address; City; State; Zip Code  |         |   | •        | Amount of Contribution (\$)                      | \$75.53   |
|   | Dringing con               | Sugar Land, TX 77478  |         | Employer (Coo Instructions              | <u> </u> |  |           |
|   | Not Employe                | pation / Job title (See Instructions)   |         | Employer (See Instructions Not Employed | 5)       |  |           |
|   | Date<br>10/05/2024         | Full name of contributor out-of-state PAC Adams, Chris  Contributor address; City; State; Zip Code                      | (ID#:   | )                                       |          | Amount of Contribution (\$)                      | \$4.54    |
|   | Principal occur            | Washington, DC 20012-2617 pation / Job title (See Instructions)   |         | Employer (See Instructions              | ;)<br>   |  |           |
|   | Software Dev               | ,   |         | The Library of Congress                 |          |  |           |
|   | Date<br>10/13/2024         | Full name of contributor out-of-state PAC ( Albert, David  Contributor address; City; State; Zip Code  Austin, TX 78741 |         | )                                       |          | Amount of Contribution (\$)                      | \$500.00  |
|   | · ·                        | pation / Job title (See Instructions)<br>nunity College   |         | Employer (See Instructions Professor    | 5)       |  |           |
|   | Date<br>10/13/2024         | Full name of contributor out-of-state PAC ( Albert, David Contributor address; City; State; Zip Code  Austin, TX 78741  |         |   | •        | Amount of Contribution (\$)                      | \$250.00  |
|   |                            | pation / Job title (See Instructions)<br>nunity College   |         | Employer (See Instructions Professor    | 5)       |  |           |
|   | , agair Comm               |   |         | 1 10103301                              |          |  |           |

|   | MONET                          | ARY POLITICAL (  | IS                      | SCHEDULE A1 |   |    |  |            |
|---|--------------------------------|--|-------------------------|-------------|---|----|--|------------|
|   | The Instru                     | ction Guide explains how   | v to complete this f    | orı         | n.  | 1  | Total pages Schedule A1:<br>Sch: 2/95 Rpt: 5/157 |            |
| 2 | FILER NAME<br>Carranza, Kı     | ristian  |                         |             |   | 3  | Filer ID (Ethics Commission 00087920             | on Filers) |
| 4 | Date<br>10/04/2024             | <ul><li>5 Full name of contributor<br/>Alcoser, Anthony</li><li>6 Contributor address; City; S</li></ul> | out-of-state PAC (ID#:_ |             | )   | 7  | Amount of Contribution (\$)                      | \$100.00   |
|   |                                | San Antonio, TX 78201  |                         |             |   |    |  |            |
| 8 | Principal occu<br>Professor    | pation / Job title (See Instruction  | s)                      | 9           | Employer (See Instructions St Mary's            | 5) |  |            |
|   | Date<br>09/30/2024             | Full name of contributor All In PAC Contributor address; City; S   |                         |             | )   | •  | Amount of Contribution (\$)                      | \$2,000.00 |
|   | Deireciant                     | Dallas, TX 75360   | -1                      | _           | Faralas a (Caralas trasticas                    |    |  |            |
|   | Principal occu                 | pation / Job title (See Instruction  | 5)                      |             | Employer (See Instructions                      | 5) |  |            |
|   | Date<br>10/18/2024             | Full name of contributor Allen-Savietta, Cora Contributor address; City; S                               | out-of-state PAC (ID#:_ |             | )   | •  | Amount of Contribution (\$)                      | \$1.00     |
|   |                                | Austin, TX 78752   |                         |             |   |    |  |            |
|   | Principal occu<br>Statistician | pation / Job title (See Instruction  | s)                      |             | Employer (See Instructions<br>Berry Consultants | 5) |  |            |
|   | Date<br>10/05/2024             | Full name of contributor Alonso, Arnoldo Contributor address; City; S Laredo, TX 78040                   | out-of-state PAC (ID#:_ |             |   | •  | Amount of Contribution (\$)                      | \$80.00    |
|   | Principal occu<br>Not Employe  | pation / Job title (See Instructioned  | s)                      |             | Employer (See Instructions Not Employed         | 5) |  |            |
|   | Date<br>10/16/2024             | Full name of contributor Altamirano, Alberto Contributor address; City; S San Antonio, TX 78215          | out-of-state PAC (ID#:_ |             |   | •  | Amount of Contribution (\$)                      | \$250.00   |
|   | Principal occu                 | pation / Job title (See Instruction  | s)                      |             | Employer (See Instructions Irys Technologies    | 5) |  |            |
|   |                                |  |                         |             |   |    |  |            |

|   | MONET                        | ARY POLITICAL CO  | S                                    |                                    | SCHEDULE A1                                   |  |
|---|------------------------------|---|--------------------------------------|------------------------------------|---|--|
|   | The Instruc                  | ction Guide explains how to   | complete this form                   | n.                                 | 1   | Total pages Schedule A1:<br>Sch: 3/95 Rpt: 6/157 |
| 2 | FILER NAME<br>Carranza, Kr   | istian  |                                      |                                    | 3   | Filer ID (Ethics Commission Filers)<br>00087920  |
| 4 | Date<br>10/06/2024           | <ul><li>5 Full name of contributor Anderson, David</li><li>6 Contributor address; City; State</li></ul> | out-of-state PAC (ID#:<br>; Zip Code |                                    | 7   | Amount of Contribution (\$) \$100.00             |
| 8 | Principal occu               | Austin, TX 78704 pation / Job title (See Instructions)  | 9                                    | Employer (See Instructions         | <u> </u>                                      |  |
|   | Lawyer                       | ,   |                                      | Raise Your Hand Texas              |   |  |
|   | Date<br>10/02/2024           | Full name of contributor  Annie's List  Contributor address; City; State                                |                                      | )                                  |   | Amount of Contribution (\$) \$20,000.00          |
|   | Deignaignal annu             | Austin, TX 78703  |                                      | Franks or (Cooks trate of          | <u>,                                     </u> |  |
|   | Principal occu               | pation / Job title (See Instructions)   |                                      | Employer (See Instructions         | 5)  |  |
|   | Date<br>10/25/2024           | Full name of contributor  Annie's List  Contributor address; City; State                                | out-of-state PAC (ID#:;              | )                                  |   | Amount of Contribution (\$) \$10,000.00          |
|   |                              | Austin, TX 78703  |                                      |                                    |   |  |
|   | Principal occu               | pation / Job title (See Instructions)   |                                      | Employer (See Instructions         | s)  |  |
|   | Date<br>10/07/2024           | Full name of contributor Appleman, Gordon  Contributor address; City; State  Fort Worth, TX 76109       |                                      | )                                  |   | Amount of Contribution (\$) \$150.00             |
|   | Principal occu<br>Retired    | pation / Job title (See Instructions)   |                                      | Employer (See Instructions Retired | 5)  |  |
|   | Date<br>10/24/2024           | Full name of contributor Archer, Christian Contributor address; City; State San Antonio, TX 78212       | out-of-state PAC (ID#:; Zip Code     | )                                  |   | Amount of Contribution (\$) \$10,000.00          |
|   | Principal occu<br>Consultant | pation / Job title (See Instructions)   |                                      | Employer (See Instructions<br>Self | 5)  |  |
|   |                              |   | •                                    |                                    |   |  |

|   | MONET                          | ARY POLITICAL CONTRIBUTIO  | IS  |  | SCHEDUL        | E <b>A1</b>                                      |            |
|---|--------------------------------|--|-----|--|----------------|--|------------|
|   | The Instru                     | ction Guide explains how to complete this fo   | orı | m.   | 1              | Total pages Schedule A1:<br>Sch: 4/95 Rpt: 7/157 |            |
| 2 | FILER NAME<br>Carranza, Kı     | istian   |     |  | 3              | Filer ID (Ethics Commission 00087920             | n Filers)  |
| 4 | Date<br>10/05/2024             | <ul> <li>Full name of contributor</li></ul>  |     |  | 7              | Amount of Contribution (\$)                      | \$48.00    |
| 8 | Principal occu<br>Retired      | Bellville, TX 77418 pation / Job title (See Instructions)  | 9   | Employer (See Instructions None                | <u> </u><br>s) |  |            |
|   | Date<br>10/10/2024             | Full name of contributor out-of-state PAC (ID#:_ Arguijo, Tanya Contributor address; City; State; Zip Code San Antonio, TX 78230           |     | )  |                | Amount of Contribution (\$)                      | \$25.00    |
|   | Principal occu<br>Event Planne | pation / Job title (See Instructions)  |     | Employer (See Instructions                     | <u>l</u><br>s) |  |            |
|   | Date<br>10/25/2024             | Full name of contributor out-of-state PAC (ID#:_ Association of Texas Professional Educators PA Contributor address; City; State; Zip Code |     | )  |                | Amount of Contribution (\$)                      | \$3,000.00 |
|   | Principal occu                 | Austin, TX 78752 pation / Job title (See Instructions)   |     | Employer (See Instructions                     | <u> </u><br>s) |  |            |
|   | Date 09/30/2024                | Contributor address; City; State; Zip Code   |     |  |                | Amount of Contribution (\$)                      | \$400.00   |
|   | Principal occu<br>Mediator     | Houston, TX 77098 pation / Job title (See Instructions)  |     | Employer (See Instructions Self                | <u> </u><br>s) |  |            |
|   | Date<br>09/30/2024             | Full name of contributor out-of-state PAC (ID#:_Avellar, Michael  Contributor address; City; State; Zip Code  San Antonio, TX 78209        |     | )  |                | Amount of Contribution (\$)                      | \$300.00   |
|   | Principal occu<br>Executive    | pation / Job title (See Instructions)  |     | Employer (See Instructions Performance Managem |                | Ltd  |            |
|   |                                | •  |     |  |                |  |            |

|   | MONEI                           | ARY POLITICAL CONTRIBUTION   |                         |                                | SCHEDULE | <b>A1</b>  |         |
|---|---------------------------------|--|-------------------------|--------------------------------|----------|--|---------|
|   | The Instruc                     | ction Guide explains how to complete this fo   | orm.                    |                                | 1        | Total pages Schedule A1:<br>Sch: 5/95 Rpt: 8/157 |         |
| 2 | FILER NAME<br>Carranza, Kr      | istian   |                         |                                | 3        | Filer ID (Ethics Commission 00087920             | Filers) |
| 4 | Date 09/27/2024                 | <ul> <li>Full name of contributor  out-of-state PAC (ID#:_Avery, Rita</li> <li>Contributor address; City; State; Zip Code</li> </ul> |                         |                                | 7        | Amount of Contribution (\$)                      | \$50.00 |
| 8 | Principal occu<br>Office Mgr    | San Antonio, TX 78201<br>pation / Job title (See Instructions)   |                         | See Instructions               |          |  |         |
|   | Date<br>10/22/2024              | Full name of contributor out-of-state PAC (ID#:_Avey, Ethan  Contributor address; City; State; Zip Code  Austin, TX 78703            |                         |                                |          | Amount of Contribution (\$)                      | \$25.00 |
|   | Principal occu<br>Not Employe   | pation / Job title (See Instructions)  | Employer (<br>Not Emplo | See Instructions               | )        |  |         |
|   | Date<br>10/06/2024              | Full name of contributor out-of-state PAC (ID#:_Ayala, David  Contributor address; City; State; Zip Code                             |                         | )                              |          | Amount of Contribution (\$)                      | \$15.00 |
|   | Principal occu                  | Houston, TX 77098<br>pation / Job title (See Instructions)   | Employer (              | See Instructions               | )        |  |         |
|   | Payroll Servi                   | ce Rep   | Houston (               | Community Col                  | lleç     | je   |         |
|   | Date<br>10/16/2024              | Full name of contributor   |                         | )                              |          | Amount of Contribution (\$)                      | \$25.00 |
|   | Principal occu<br>Payroll Servi | Houston, TX 77098 pation / Job title (See Instructions) ce Rep   |                         | See Instructions Community Col |          | ge   |         |
|   | Date<br>09/28/2024              | Full name of contributor out-of-state PAC (ID#:_BREEN, MARY  Contributor address; City; State; Zip Code  Glen Rock, PA 17327         |                         | )                              |          | Amount of Contribution (\$)                      | \$25.00 |
|   | Principal occu<br>Not Employe   | pation / Job title (See Instructions)  | Employer (<br>Not Emplo | See Instructions               | )        |  |         |
|   |                                 |  | <u> </u>                |                                |          |  |         |

|   | MONET                          | ARY POLITICAL CONT   | S                 |   | SCHEDUL    | E <b>A1</b>                                      |           |
|---|--------------------------------|--|-------------------|---|------------|--|-----------|
|   | The Instruc                    | ction Guide explains how to con  | nplete this forr  | n.  | 1          | Total pages Schedule A1:<br>Sch: 6/95 Rpt: 9/157 |           |
| 2 | FILER NAME<br>Carranza, Kr     | istian   |                   |   | 3          | Filer ID (Ethics Commission 00087920             | n Filers) |
| 4 | Date<br>10/09/2024             | BURNETT, NANCY   | f-state PAC (ID#: |   | 7          | Amount of Contribution (\$)                      | \$10.00   |
| 8 | Principal occur                | San Antonio, TX 78230 pation / Job title (See Instructions)                            | ام                | Employer (See Instructions                        |            |  |           |
| 0 | Not Employe                    |  | 9                 | Not Employed                                      | ')         |  |           |
|   | Date<br>10/20/2024             | Full name of contributor out-of Bailey, John Contributor address; City; State; Zip C   | f-state PAC (ID#: |   |            | Amount of Contribution (\$)                      | \$35.00   |
|   | Dringing aggr                  | San Antonio, TX 78209  |                   | Employer (See Instructions                        | _          |  |           |
|   | Climate Advi                   | pation / Job title (See Instructions)<br>Sor   |                   | Employer (See Instructions NRDC                   | )          |  |           |
|   | Date 09/30/2024                | Full name of contributor out-of Bakale, Amanda Contributor address; City; State; Zip C | f-state PAC (ID#: | )   |            | Amount of Contribution (\$)                      | \$5.00    |
|   |                                | New York, NY 10023   |                   |   |            |  |           |
|   | Principal occup<br>Attorney    | pation / Job title (See Instructions)  |                   | Employer (See Instructions<br>BrandEd             | <u>;</u> ) |  |           |
|   | Date<br>10/13/2024             | Baker, Mary  |                   |   |            | Amount of Contribution (\$)                      | \$50.00   |
|   | Principal occup<br>Not Employe | pation / Job title (See Instructions)  |                   | Employer (See Instructions Not Employed           | )          |  |           |
|   | Date<br>10/10/2024             | Baker, Samuel  | f-state PAC (ID#: | )   |            | Amount of Contribution (\$)                      | \$250.00  |
|   | Principal occu<br>Teacher      | oation / Job title (See Instructions)  |                   | Employer (See Instructions<br>University of Texas | )          |  |           |
|   |                                |  | 1                 |   |            |  |           |

|   | MONET                          | ARY POLITICAL CONTRIBUT  | IS     |   | SCHEDUL  | E <b>A1</b>                                       |           |
|---|--------------------------------|--|--------|---|----------|---|-----------|
|   | The Instruc                    | ction Guide explains how to complete th  | is for | m.  | 1        | Total pages Schedule A1:<br>Sch: 7/95 Rpt: 10/157 |           |
| 2 | FILER NAME<br>Carranza, Kr     | istian   |        |   | 3        | Filer ID (Ethics Commission 00087920              | n Filers) |
| 4 | Date<br>10/12/2024             | <ul> <li>Full name of contributor</li></ul>  |        |   | 7        | Amount of Contribution (\$)                       | \$200.00  |
| 8 | Principal occu                 | Austin, TX 78701 pation / Job title (See Instructions)   | 9      | Employer (See Instructions                          | <br>s)   |   |           |
|   | Not Employe                    | ed .   |        | Not Employed  |          |   |           |
|   | Date<br>10/23/2024             | Full name of contributor out-of-state PAC (I Barnave, Serge Contributor address; City; State; Zip Code  Bayside Queens, NY 11360-1414  |        | )   |          | Amount of Contribution (\$)                       | \$5.00    |
|   | Principal occu                 | pation / Job title (See Instructions)  |        | Employer (See Instructions                          | <u> </u> |   |           |
|   | Not Employe                    | ed   |        | Not Employed  |          |   |           |
|   | Date<br>10/10/2024             | Full name of contributor   | D#:    | )   | •        | Amount of Contribution (\$)                       | \$250.00  |
|   |                                | Houston, TX 77008  |        |   |          |   |           |
|   | Principal occu<br>Investment A | pation / Job title (See Instructions)<br>Advisor   |        | Employer (See Instructions<br>Cord Investment Manag |          | nent LLC  |           |
|   | Date<br>10/03/2024             | Full name of contributor out-of-state PAC (I Barnett, Byron Contributor address; City; State; Zip Code San Antonio, TX 78254           |        | )   |          | Amount of Contribution (\$)                       | \$250.00  |
|   | Principal occu<br>Attorney     | pation / Job title (See Instructions)  |        | Employer (See Instructions Self                     | 5)       |   |           |
|   | Date<br>09/27/2024             | Full name of contributor out-of-state PAC (I<br>Barsenas, James<br>Contributor address; City; State; Zip Code<br>San Antonio, TX 78221 | D#:    |   | •        | Amount of Contribution (\$)                       | \$25.00   |
|   | Principal occu<br>Customer Re  | pation / Job title (See Instructions)  |        | Employer (See Instructions Bell & McCoy             | s)       |   |           |
|   | Sustainer IVE                  | <u>~</u>   |        | Don't Micooy  |          |   |           |

|   | MONET                         | ARY POLITICAL (   | NS                                  | SCHEDULE A                                       |                |   |            |
|---|-------------------------------|---|-------------------------------------|--|----------------|---|------------|
|   | The Instruc                   | ction Guide explains how  | to complete this for                | rm.  | 1              | Total pages Schedule A1:<br>Sch: 8/95 Rpt: 11/157 |            |
| 2 | FILER NAME<br>Carranza, Kr    | istian  |                                     |  | 3              | Filer ID (Ethics Commission 00087920              | on Filers) |
| 4 | Date<br>10/16/2024            | 6 Contributor address; City; Si   |                                     |  | 7              | Amount of Contribution (\$)                       | \$10.00    |
| 8 | Principal occu<br>Not Employe | Little Rock, AR 72223-429 pation / Job title (See Instructions ed                                 |                                     | Employer (See Instruction Not Employed           | <u> </u><br>s) |   |            |
|   | Date<br>10/21/2024            | Full name of contributor Batdorf, Joseph Contributor address; City; Si Houston, TX 77077          |                                     |  |                | Amount of Contribution (\$)                       | \$2,500.00 |
|   | Principal occu<br>President   | pation / Job title (See Instructions  | )                                   | Employer (See Instruction J Turner Research      | s)             |   |            |
|   | Date<br>10/03/2024            | Full name of contributor Bates, Katherine Contributor address; City; Si                           | out-of-state PAC (ID#:ate; Zip Code | )  |                | Amount of Contribution (\$)                       | \$25.00    |
|   | Principal occu                | McKinney, TX 75071 pation / Job title (See Instructions   | )                                   | Employer (See Instruction Not Employed           | s)             |   |            |
|   | Date 10/18/2024               | Full name of contributor Bauserman, Robert  Contributor address; City; Si  Owings Mills, MD 21117 |                                     | )  |                | Amount of Contribution (\$)                       | \$1.25     |
|   |                               | pation / Job title (See Instructions<br>arch Manager  | )                                   | Employer (See Instruction Williams Consulting LL |                |   |            |
|   | Date<br>10/16/2024            | Full name of contributor Bell, Megan Contributor address; City; Si Washington, DC 20015           |                                     |  |                | Amount of Contribution (\$)                       | \$20.00    |
|   | Principal occu<br>Advisor     | pation / Job title (See Instructions  |                                     | Employer (See Instruction White House            | s)             |   |            |
|   |                               |   |                                     |  |                |   |            |

|   | MONET                         | ARY POLITICAL CONTRIBUTION   |     | SCHEDULE A1                                     |        |   |
|---|-------------------------------|--|-----|---|--------|---|
|   | The Instruc                   | ction Guide explains how to complete this  | for | m.  | 1      | Total pages Schedule A1:<br>Sch: 9/95 Rpt: 12/157 |
| 2 | FILER NAME<br>Carranza, Kr    | istian   |     |   | 3      | Filer ID (Ethics Commission Filers)<br>00087920   |
| 4 | Date<br>10/23/2024            | <ul> <li>Full name of contributor  out-of-state PAC (ID#: Benefiel, Hillary</li> <li>Contributor address; City; State; Zip Code</li> </ul> |     | )   | 7      | Amount of Contribution (\$) \$50.00               |
|   |                               | Los Angeles, CA 91601  |     |   |        |   |
| 8 | Principal occu<br>Writer      | pation / Job title (See Instructions)  | 9   | Employer (See Instructions Open the Lights Inc. | 5)     |   |
|   | Date<br>10/07/2024            | Full name of contributor out-of-state PAC (ID#:<br>Benson, Kimberly<br>Contributor address; City; State; Zip Code                          |     | )   |        | Amount of Contribution (\$) \$1.00                |
|   | Principal occu                | Germantown, MD 20876 pation / Job title (See Instructions)   | Τ   | Employer (See Instructions                      | <br>;) |   |
|   | Pharmacolog                   |  |     | US FDA  | ,      |   |
|   | Date<br>10/12/2024            | Full name of contributor out-of-state PAC (ID#: Berebitsky, Larry  Contributor address; City; State; Zip Code                              |     | )   |        | Amount of Contribution (\$) \$10.00               |
|   |                               | Olympia, WA 98501-7034   |     |   |        |   |
|   | Principal occu<br>Accountant  | pation / Job title (See Instructions)  |     | Employer (See Instructions Seabrook             | 5)     |   |
|   | Date<br>10/09/2024            | Full name of contributor out-of-state PAC (ID#: Bernal, Mary  Contributor address; City; State; Zip Code  Universal city, TX 78148         |     | )   |        | Amount of Contribution (\$) \$20.00               |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)  |     | Employer (See Instructions<br>Not Employed      | 5)     |   |
|   | Date<br>10/06/2024            | Full name of contributor out-of-state PAC (ID#: Bexar County Justice PAC Contributor address; City; State; Zip Code San Antonio, TX 78212  |     |   |        | Amount of Contribution (\$) \$25,000.00           |
|   | Principal occu                | pation / Job title (See Instructions)  |     | Employer (See Instructions                      | s)     |   |
|   |                               |  | •   |   |        |   |

|   | MONET                         | ARY POLITICAL CO  | NTRIBUTION                      | S  |   | SCHEDUL  | E <b>A1</b> |
|---|-------------------------------|---|---------------------------------|--|---|--|-------------|
|   | The Instruc                   | ction Guide explains how to   | complete this form              | n.   | 1 | Total pages Schedule A1:<br>Sch: 10/95 Rpt: 13/157 |             |
| 2 | FILER NAME<br>Carranza, Kr    | istian  |                                 |  | 3 | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date<br>10/04/2024            | Bhuyan-Duncan, Leela  | out-of-state PAC (ID#:          | )  | 7 | Amount of Contribution (\$)                        | \$50.00     |
| 8 | Principal occu                | The Woodlands, TX 77382 pation / Job title (See Instructions)                                     | 9                               | Employer (See Instructions                 | ) |  |             |
|   | Professor                     |   |                                 | Lone Star College                          |   |  |             |
|   | Date<br>10/08/2024            | Full name of contributor  Binford, Lincoln  Contributor address; City; State;                     |                                 | )  |   | Amount of Contribution (\$)                        | \$100.00    |
|   |                               | Austin, TX 78756  |                                 |  |   |  |             |
|   |                               | pation / Job title (See Instructions)   |                                 | Employer (See Instructions                 | ) |  |             |
|   | Massage Th                    | erapist<br>   |                                 | Self                                       |   |  |             |
|   | Date<br>10/16/2024            | Full name of contributor  Black, Mary  Contributor address; City; State;                          | out-of-state PAC (ID#: Zip Code | )  |   | Amount of Contribution (\$)                        | \$2.08      |
|   |                               | Austin, TX 78756  |                                 |  |   |  |             |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)   |                                 | Employer (See Instructions<br>Not Employed | ) |  |             |
|   | Date<br>10/13/2024            | Full name of contributor  Blanco, Jorge  Contributor address; City; State;  San Antonio, TX 78218 |                                 | )  |   | Amount of Contribution (\$)                        | \$100.00    |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)   |                                 | Employer (See Instructions<br>Not Employed | ) |  |             |
|   | Date<br>10/09/2024            | Full name of contributor  Boswell, Lynn  Contributor address; City; State;  Austin, TX 78703      | out-of-state PAC (ID#:          | )  |   | Amount of Contribution (\$)                        | \$250.00    |
|   | Principal occu<br>Documentary | pation / Job title (See Instructions) y Filmmaker   |                                 | Employer (See Instructions Villita Media   | ) |  |             |
|   |                               | ,   |                                 |  |   |  |             |

|   | MONET                           | ARY POLITICAL CONTRIBUTION   | )N | IS                                      |   | SCHEDUI  | E A1       |
|---|---------------------------------|--|----|---|---|--|------------|
|   | The Instruc                     | ction Guide explains how to complete this f  | or | m.                                      | 1   | Total pages Schedule A1:<br>Sch: 11/95 Rpt: 14/157 |            |
| 2 | FILER NAME<br>Carranza, Kr      | istian   |    |   | 3   | Filer ID (Ethics Commission 00087920               | on Filers) |
| 4 | Date<br>10/08/2024              | <ul> <li>Full name of contributor</li></ul>  |    | )                                       | 7   | Amount of Contribution (\$)                        | \$1.66     |
| 8 | Principal occu<br>Not Employe   | Sacramento, CA 95835 pation / Job title (See Instructions)   | 9  | Employer (See Instructions Not Employed | <u> </u><br>s)                                |  |            |
|   | Date 09/27/2024                 | Full name of contributor   |    |   |   | Amount of Contribution (\$)                        | \$100.00   |
|   | Principal occu<br>Farmer        | pation / Job title (See Instructions)  |    | Employer (See Instructions<br>Self      | <u>                                      </u> |  |            |
|   | Date<br>10/15/2024              | Full name of contributor out-of-state PAC (ID#:_ Bowles, Cole Contributor address; City; State; Zip Code  San Antonio, TX 78253        |    |   |   | Amount of Contribution (\$)                        | \$18.00    |
|   | Principal occu<br>Political Con | pation / Job title (See Instructions)  |    | Employer (See Instructions<br>Self      | <u>                                      </u> |  |            |
|   | Date<br>10/14/2024              | Full name of contributor out-of-state PAC (ID#:_ Boyd, Rebecca Contributor address; City; State; Zip Code  Bend, OR 97703              |    |   |   | Amount of Contribution (\$)                        | \$2.50     |
|   | Principal occu<br>Voiceover     | pation / Job title (See Instructions)  |    | Employer (See Instructions<br>Self      | 5)  |  |            |
|   | Date<br>10/06/2024              | Full name of contributor out-of-state PAC (ID#:_Braufman, Jill  Contributor address; City; State; Zip Code  Rockville Centre, NY 11570 |    |   |   | Amount of Contribution (\$)                        | \$1,000.00 |
|   | Principal occu<br>Not Employe   | pation / Job title (See Instructions)  |    | Employer (See Instructions Not Employed | s)  |  |            |
|   |                                 |  |    |   |   |  |            |

|   | MONET                         | ARY POLITICAL (  | CONTRIBUTIO                                  | <u>N</u> |   |           | SCHEDUL  | E <b>A1</b> |
|---|-------------------------------|--|--|----------|---|-----------|--|-------------|
|   | The Instru                    | ction Guide explains how   | to complete this fo                          | orr      | m.  | 1         | Total pages Schedule A1:<br>Sch: 12/95 Rpt: 15/157 |             |
| 2 | FILER NAME<br>Carranza, Kr    | ristian  |  |          |   | 3         | Filer ID (Ethics Commissio 00087920                | n Filers)   |
| 4 | Date 09/28/2024               | <ul><li>5 Full name of contributor<br/>Briones, Lesley</li><li>6 Contributor address; City; St</li></ul> | out-of-state PAC (ID#:_                      |          |   | 7         | Amount of Contribution (\$)                        | \$500.00    |
|   |                               | Houston, TX 77008  |  |          |   |           |  |             |
| 8 | Principal occu<br>Commission  | pation / Job title (See Instructions<br>er   | ;)<br>                                       | 9        | Employer (See Instructions<br>Harris County | 5)        |  |             |
|   | Date<br>10/26/2024            | Full name of contributor<br>Brodsky, Nina<br>Contributor address; City; S                                | out-of-state PAC (ID#:                       |          | )   |           | Amount of Contribution (\$)                        | \$2.50      |
|   | Principal occu                | Austin, TX 78731 pation / Job title (See Instructions  | <u>,                                    </u> |          | Employer (See Instructions                  | <u>:)</u> |  |             |
|   | Bookkeeper                    |  | "  |          | Self  | "         |  |             |
|   | Date<br>09/28/2024            | Full name of contributor Bronstein, Dale Contributor address; City; S                                    | out-of-state PAC (ID#:_                      |          | )   |           | Amount of Contribution (\$)                        | \$10.00     |
|   |                               | Fort Worth, TX 76112   |  |          |   |           |  |             |
|   | Principal occu<br>Wine Mercha | pation / Job title (See Instructions<br>ant  | ;)   |          | Employer (See Instructions Mr.              | s)        |  |             |
|   | Date<br>09/27/2024            | Full name of contributor Brooker, Robert  Contributor address; City; S  Austin, TX 78738                 | out-of-state PAC (ID#:_                      |          | )   |           | Amount of Contribution (\$)                        | \$500.00    |
|   | Principal occu<br>Real Estate | pation / Job title (See Instructions   | 5)   |          | Employer (See Instructions Alom LLC         | 5)        |  |             |
|   | Date<br>10/21/2024            | Full name of contributor Brown, Ben Contributor address; City; S Austin, TX 78704                        | out-of-state PAC (ID#:_                      |          | )   | -         | Amount of Contribution (\$)                        | \$166.67    |
|   | Principal occu<br>Software De | pation / Job title (See Instructions<br>veloper  | s)   |          | Employer (See Instructions Microsoft        | s)        |  |             |
|   |                               |  |  |          |   |           |  |             |

|   | MONET                         | ARY POLITICAL C  | ONTRIBUTION                             | IS   |    | SCHEDUL  | E <b>A1</b> |
|---|-------------------------------|--|---|--|----|--|-------------|
|   | The Instruc                   | ction Guide explains how   | to complete this for                    | n.   | 1  | Total pages Schedule A1:<br>Sch: 13/95 Rpt: 16/157 |             |
| 2 | FILER NAME<br>Carranza, Kr    | istian   |   |  | 3  | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date 10/13/2024               | <ul><li>5 Full name of contributor [<br/>Brumer, Jonathan</li><li>6 Contributor address; City; Sta</li></ul> | out-of-state PAC (ID#:<br>ite; Zip Code | )  | 7  | Amount of Contribution (\$)                        | \$50.00     |
|   |                               | Washington, DC 20015   |   |  |    |  |             |
| 8 | Principal occu<br>Attorney    | pation / Job title (See Instructions)  | 9                                       | Employer (See Instructions<br>Federal Government       | i) |  |             |
|   | Date<br>10/02/2024            | Full name of contributor Bruno, Paul Contributor address; City; Sta  |   |  |    | Amount of Contribution (\$)                        | \$25.00     |
|   | Dringing Lagra                | Champaign, IL 61820  |   | Franksian (Cook batwatian                              | _  |  |             |
|   | Assistant Pro                 | pation / Job title (See Instructions)<br>ofessor   |   | Employer (See Instructions University of Illinois Urba |    | a-Champaign  |             |
|   | Date<br>10/04/2024            | Full name of contributor [<br>Bryant, Deborah<br>Contributor address; City; Sta                              |   |  |    | Amount of Contribution (\$)                        | \$100.00    |
|   |                               | Houston, TX 77055  |   |  |    |  |             |
|   | Principal occu<br>Retired     | pation / Job title (See Instructions)  |   | Employer (See Instructions Retired                     | 5) |  |             |
|   | Date<br>10/06/2024            | Full name of contributor  Burtis, Theodore  Contributor address; City; Sta  Germantown, NY 12526             |   |  |    | Amount of Contribution (\$)                        | \$10.00     |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)  |   | Employer (See Instructions Not Employed                | )  |  |             |
|   | Date<br>10/06/2024            | Full name of contributor Butz, Alaine Contributor address; City; Sta Houston, TX 77096                       | out-of-state PAC (ID#:<br>ite; Zip Code | )  |    | Amount of Contribution (\$)                        | \$5.00      |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)  |   | Employer (See Instructions Not Employed                | )  |  |             |
|   |                               |  | ,                                       |  |    |  |             |

|   | MONET                         | ARY POLITICAL CONTRIBUT   | ION   | NS .                                    |         | SCHEDUL  | E A1       |
|---|-------------------------------|---|-------|---|---------|--|------------|
|   | The Instruc                   | ction Guide explains how to complete thi  | s for | m.                                      | 1       | Total pages Schedule A1:<br>Sch: 14/95 Rpt: 17/157 |            |
| 2 | FILER NAME<br>Carranza, Kr    | istian  |       |   | 3       | Filer ID (Ethics Commission 00087920               | n Filers)  |
| 4 | Date<br>09/28/2024            | <ul> <li>Full name of contributor</li></ul>   |       |   | 7       | Amount of Contribution (\$)                        | \$1.25     |
| 8 | Principal occur               | Bakersfield, CA 93312 pation / Job title (See Instructions)   | 9     | Employer (See Instructions              | s)      |  |            |
|   | Not Employe                   |   |       | Not Employed                            | -,      |  |            |
|   | Date<br>10/02/2024            | Full name of contributor out-of-state PAC (IE CONNAH, GRAHAM  Contributor address; City; State; Zip Code                          |       | )                                       |         | Amount of Contribution (\$)                        | \$19.00    |
|   |                               | Baltimore, MD 21211   |       |   | <u></u> |  |            |
|   | Not Employe                   | pation / Job title (See Instructions) d   |       | Employer (See Instructions Not Employed | 5)      |  |            |
|   | Date<br>10/16/2024            | Full name of contributor out-of-state PAC (IECWA Local 6143  Contributor address; City; State; Zip Code                           | D#:   | )                                       |         | Amount of Contribution (\$)                        | \$3,167.00 |
|   |                               | San Antonio, TX 78215   |       |   |         |  |            |
|   | Principal occu                | pation / Job title (See Instructions)   |       | Employer (See Instructions              | s)      |  |            |
|   | Date<br>09/28/2024            | Full name of contributor out-of-state PAC (IE Cadena, Omar  Contributor address; City; State; Zip Code  San Antonio, TX 78245     |       | )                                       | •       | Amount of Contribution (\$)                        | \$5.00     |
|   | Principal occu<br>Systems Ana | pation / Job title (See Instructions)<br>alyst  |       | Employer (See Instructions Schlumberger | 5)      |  |            |
|   | Date<br>10/10/2024            | Full name of contributor out-of-state PAC (IE Calef, Fred  Contributor address; City; State; Zip Code  Huntington Beach, CA 92647 |       |   | •       | Amount of Contribution (\$)                        | \$100.00   |
|   |                               | pation / Job title (See Instructions) rems Engineer   |       | Employer (See Instructions Caltech      | 5)      |  |            |
|   | Solution System               | and Engineer  |       | Cartoon                                 |         |  |            |

|   | MONET                         | ARY POLITICAL (   | CONTRIBUTION                            | IS  |                | SCHEDUI  | E A1       |
|---|-------------------------------|---|---|---|----------------|--|------------|
|   | The Instruc                   | ction Guide explains how  | to complete this for                    | m.  | 1              | Total pages Schedule A1:<br>Sch: 15/95 Rpt: 18/157 |            |
| 2 | FILER NAME<br>Carranza, Kr    | istian  |   |   | 3              | Filer ID (Ethics Commission 00087920               | on Filers) |
| 4 | Date<br>10/03/2024            | <ul><li>5 Full name of contributor</li><li>Campaign, Richard Raym</li><li>6 Contributor address; City; St</li></ul> |   |   | 7              | Amount of Contribution (\$)                        | \$5,000.00 |
|   | Dringing aggr                 | Laredo, TX 78045  | ) lo                                    | Employer (See Instructions                        | <u>,,</u>      |  |            |
| 8 | State Repres                  | pation / Job title (See Instructions<br>sentative   | 9                                       | Employer (See Instructions State of Texas         | 5)             |  |            |
|   | Date<br>09/28/2024            | Full name of contributor  Campbell, Kathleen  Contributor address; City; St   |   |   | •              | Amount of Contribution (\$)                        | \$50.00    |
|   | Principal occu                | San Antonio, TX 78204 pation / Job title (See Instructions  | s)                                      | Employer (See Instructions                        | <u> </u><br>s) |  |            |
|   | Not Employe                   |   | ,                                       | Not Employed                                      | •              |  |            |
|   | Date<br>10/23/2024            | Full name of contributor Carlson, Allen Contributor address; City; St   | out-of-state PAC (ID#:<br>ate; Zip Code |   | •              | Amount of Contribution (\$)                        | \$100.00   |
|   |                               | San Antonio, TX 78230   |   |   | L              |  |            |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions<br>ed  | )                                       | Employer (See Instructions Not Employed           | 5)             |  |            |
|   | Date<br>10/13/2024            | Full name of contributor Carranza, Susana Contributor address; City; St Austin, TX 78701                            | out-of-state PAC (ID#:<br>ate; Zip Code | )   |                | Amount of Contribution (\$)                        | \$20.00    |
|   | Principal occu<br>Chemical En | pation / Job title (See Instructions<br>gineer  | )                                       | Employer (See Instructions Makel Engineering Inc. | 5)             |  |            |
|   | Date<br>10/24/2024            | Full name of contributor Carrillo-Valdez, Lydia Contributor address; City; St San Antonio, TX 78240                 | out-of-state PAC (ID#:                  |   |                | Amount of Contribution (\$)                        | \$25.00    |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions  | )                                       | Employer (See Instructions Not Employed           | 5)             |  |            |
|   |                               |   | L                                       |   |                |  |            |

|   | MONET                         | ARY POLITICAL CONTRIBU  | TION    | IS   |                | SCHEDUL  | E <b>A1</b> |
|---|-------------------------------|---|---------|--|----------------|--|-------------|
|   | The Instru                    | ction Guide explains how to complete th   | his for | m.   | 1              | Total pages Schedule A1:<br>Sch: 16/95 Rpt: 19/157 |             |
| 2 | FILER NAME<br>Carranza, Kr    | istian  |         |  | 3              | Filer ID (Ethics Commission 00087920               | on Filers)  |
| 4 | Date<br>10/11/2024            | <ul> <li>Full name of contributor</li></ul>   | (ID#:   |  | 7              | Amount of Contribution (\$)                        | \$25.00     |
| 8 | Principal occu<br>Not Employe | San Antonio, TX 78209 Dation / Job title (See Instructions)   | 9       | Employer (See Instructions Not Employed              | <u> </u><br>5) |  |             |
|   | Date<br>10/17/2024            | Contributor address; City; State; Zip Code  |         | )  |                | Amount of Contribution (\$)                        | \$1,000.00  |
|   | Principal occu                | San Antonio, TX 78292 pation / Job title (See Instructions)   |         | Employer (See Instructions                           | <u> </u><br>5) |  |             |
|   | Date<br>10/18/2024            | Full name of contributor out-of-state PAC Castro, Maria Delrosario  Contributor address; City; State; Zip Code                | (ID#:   | )  |                | Amount of Contribution (\$)                        | \$50.00     |
|   | Principal occu                | San Antonio, TX 78228 Dation / Job title (See Instructions)   |         | Employer (See Instructions                           | <br> -<br> s)  |  |             |
|   | Not Employe                   | d   |         | Not Employed   |                |  |             |
|   | Date<br>09/27/2024            | Full name of contributor out-of-state PAC Cavender, Catriona Contributor address; City; State; Zip Code San Antonio, TX 78212 |         |  |                | Amount of Contribution (\$)                        | \$18.00     |
|   | Principal occu<br>Attorney    | pation / Job title (See Instructions)   |         | Employer (See Instructions<br>Hornberger Fuller & Ga |                | Inc  |             |
|   | Date<br>09/28/2024            | Full name of contributor out-of-state PAC Chapman, Ron Contributor address; City; State; Zip Code Phoenix, AZ 85014           |         | )  |                | Amount of Contribution (\$)                        | \$23.00     |
|   | Principal occu<br>Not Employe | oation / Job title (See Instructions)<br>d  |         | Employer (See Instructions Not Employed              | 5)             |  |             |
|   |                               |   |         |  |                |  |             |

|   | MONET                          | ARY POLITICAL CONTRIB  | UTION          | IS   |        | SCHEDUL  | E <b>A1</b> |
|---|--------------------------------|--|----------------|--|--------|--|-------------|
|   | The Instruc                    | ction Guide explains how to complete   | e this for     | n.   | 1      | Total pages Schedule A1:<br>Sch: 17/95 Rpt: 20/157 |             |
| 2 | FILER NAME<br>Carranza, Kr     | istian   |                |  | 3      | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date<br>10/06/2024             | <ul> <li>Full name of contributor</li></ul>  |                |  | 7      | Amount of Contribution (\$)                        | \$25.00     |
| 8 | Principal occur                | Phoenix, AZ 85014 pation / Job title (See Instructions)  | l <sub>a</sub> | Employer (See Instructions                 | ;)<br> |  |             |
| ٠ | Not Employe                    |  |                | Not Employed                               | "      |  |             |
|   | Date<br>10/06/2024             | Contributor address; City; State; Zip Code   |                |  |        | Amount of Contribution (\$)                        | \$25.00     |
|   | Principal occur                | Phoenix, AZ 85014 pation / Job title (See Instructions)  |                | Employer (See Instructions                 | s)<br> |  |             |
|   | Not Employe                    |  |                | Not Employed                               | -,     |  |             |
|   | Date<br>10/07/2024             | Full name of contributor out-of-state P. Charnsangavej, Larissa Contributor address; City; State; Zip Code             | PAC (ID#:      | )  |        | Amount of Contribution (\$)                        | \$6.00      |
|   |                                | Oakland, CA 94607  |                |  |        |  |             |
|   | Principal occu<br>Not Employe  | pation / Job title (See Instructions)<br>d   |                | Employer (See Instructions<br>Not Employed | 5)     |  |             |
|   | Date<br>10/24/2024             | Full name of contributor out-of-state P. Chase, David Contributor address; City; State; Zip Code Belmont, MA 02478     |                | )  | •      | Amount of Contribution (\$)                        | \$100.00    |
|   | Principal occu<br>Software Dev | pation / Job title (See Instructions)<br>veloper   |                | Employer (See Instructions Google LLC      | 5)     |  |             |
|   | Date<br>10/15/2024             | Full name of contributor out-of-state P. Chavez, John Contributor address; City; State; Zip Code San Antonio, TX 78247 |                |  | •      | Amount of Contribution (\$)                        | \$50.00     |
|   | Principal occu<br>Not Employe  | pation / Job title (See Instructions)  |                | Employer (See Instructions Not Employed    | 5)     |  |             |
|   | F76                            |  | 1              | 1.22.                                      |        |  |             |

|   | MONET                         | ARY POLITICAL CONTRII   | BUTION       | S  |        | SCHEDULI   | E <b>A1</b> |
|---|-------------------------------|---|--------------|--|--------|--|-------------|
|   | The Instru                    | ction Guide explains how to comple  | ete this for | n.   | 1      | Total pages Schedule A1:<br>Sch: 18/95 Rpt: 21/157 |             |
| 2 | FILER NAME<br>Carranza, Kr    | istian  |              |  | 3      | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date 10/21/2024               | <ul> <li>Full name of contributor  out-of-state</li> <li>Chelsea, Betancourt</li> <li>Contributor address; City; State; Zip Code</li> </ul> | PAC (ID#:    | )  | 7      | Amount of Contribution (\$)                        | \$50.00     |
|   |                               | Universal City, TX 78148-4512   |              |  |        |  |             |
| 8 | Principal occu<br>Csm         | pation / Job title (See Instructions)   | 9            | Employer (See Instructions<br>Tailos       | s)<br> |  |             |
|   | Date<br>10/13/2024            | Chen, Matthew   | PAC (ID#:    | )  | •      | Amount of Contribution (\$)                        | \$6.25      |
|   | Principal occu                | Arlington, VA 22201 pation / Job title (See Instructions)   |              | Employer (See Instructions                 | <br>s) |  |             |
|   | СРА                           | ,   |              | Self-employed                              | ,      |  |             |
|   | Date<br>10/03/2024            | Full name of contributor out-of-state Chonle, Jeri  Contributor address; City; State; Zip Code  | PAC (ID#:    | )  | •      | Amount of Contribution (\$)                        | \$25.00     |
|   |                               | Seattle, WA 98116   |              |  |        |  |             |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)   |              | Employer (See Instructions<br>Not Employed | 5)     |  |             |
|   | Date<br>09/27/2024            | Christian, Robert   | PAC (ID#:    | )  | •      | Amount of Contribution (\$)                        | \$50.00     |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)   |              | Employer (See Instructions Not Employed    | 5)     |  |             |
|   | Date<br>10/07/2024            | Full name of contributor out-of-state Cibulka, Daniel Contributor address; City; State; Zip Code Minnetonka, MN 55343                       |              | )  | •      | Amount of Contribution (\$)                        | \$1.00      |
|   | •                             | pation / Job title (See Instructions) urce Specialist   |              | Employer (See Instructions Sherburbe SWCD  | 5)     |  |             |
|   |                               |   |              |  |        |  |             |

|   | MONET                         | ARY POLITICAL CON   | NTRIBUTION            | S  |          | SCHEDUL  | E <b>A1</b> |
|---|-------------------------------|---|-----------------------|--|----------|--|-------------|
|   | The Instruc                   | ction Guide explains how to c   | complete this form    | n.   | 1        | Total pages Schedule A1:<br>Sch: 19/95 Rpt: 22/157 |             |
| 2 | FILER NAME<br>Carranza, Kr    | istian  |                       |  | 3        | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date<br>10/04/2024            | Clark, Virginia  6 Contributor address; City; State; Z  | ut-of-state PAC (ID#: | )  | 7        | Amount of Contribution (\$)                        | \$250.00    |
| 8 | Principal occu                | Houston, TX 77005-1730 pation / Job title (See Instructions)  | 9                     | Employer (See Instructions                 | <u> </u> |  |             |
|   | Not Employe                   | ed  |                       | Not Employed                               |          |  |             |
|   | Date<br>10/03/2024            | Full name of contributor on the contributor of the contributor address; City; State; Z                  | ut-of-state PAC (ID#: |  |          | Amount of Contribution (\$)                        | \$100.00    |
|   |                               | Waco, TX 76703  | <u> </u>              |  |          |  |             |
|   | Principal occup Education Co  | pation / Job title (See Instructions)   |                       | Employer (See Instructions Self            | 5)       |  |             |
|   | Date                          |   | ut-of-state PAC (ID#: | ,  |          | Amount of Contribution (\$)                        |             |
|   | 10/10/2024                    | Cofrin, David  Contributor address; City; State; Z  |                       |  |          | , another of contribution (e)                      | \$100.00    |
|   |                               | Atlanta, GA 30306   |                       |  |          |  |             |
|   | Principal occu<br>Retired     | pation / Job title (See Instructions)   |                       | Employer (See Instructions Retired         | 5)       |  |             |
|   | Date<br>10/10/2024            | Full name of contributor on Coleman, Garnet  Contributor address; City; State; Z  Houston, TX 77288     | ut-of-state PAC (ID#: | )  |          | Amount of Contribution (\$)                        | \$500.00    |
|   | Principal occu<br>Consultant  | pation / Job title (See Instructions)   |                       | Employer (See Instructions<br>Not Employed | <u> </u> |  |             |
|   | Date<br>10/06/2024            | Full name of contributor of Collins, Jennifer  Contributor address; City; State; Z  Wellesley, MA 02482 | ut-of-state PAC (ID#: | )  |          | Amount of Contribution (\$)                        | \$2.73      |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)   |                       | Employer (See Instructions Not Employed    | 5)       |  |             |
|   |                               |   | I                     |  |          |  |             |

|   | MONET                         | ARY POLITICAL CONTRI  | BUTION       | S                                       |                | SCHEDUL  | E <b>A1</b> |
|---|-------------------------------|---|--------------|---|----------------|--|-------------|
|   | The Instruc                   | ction Guide explains how to comple  | ete this for | n.                                      | 1              | Total pages Schedule A1:<br>Sch: 20/95 Rpt: 23/157 |             |
| 2 | FILER NAME<br>Carranza, Kr    | istian  |              |   | 3              | Filer ID (Ethics Commissio 00087920                | n Filers)   |
| 4 | Date<br>10/16/2024            | Collins, Jennifer  6 Contributor address; City; State; Zip Code   |              |   | 7              | Amount of Contribution (\$)                        | \$6.25      |
| 8 | Principal occu                | Wellesley, MA 02482 pation / Job title (See Instructions)   | 9            | Employer (See Instructions              | <br>;)         |  |             |
|   | Not Employe                   |   |              | Not Employed                            | ,              |  |             |
|   | Date<br>10/04/2024            | Cones, Marian  Contributor address; City; State; Zip Code   |              | )                                       |                | Amount of Contribution (\$)                        | \$500.00    |
|   | Principal occu                | Houston, TX 77055 pation / Job title (See Instructions)   |              | Employer (See Instructions              | <u> </u><br>s) |  |             |
|   | Retired                       | , ,   |              | Retired                                 | ,              |  |             |
|   | Date<br>10/21/2024            | Full name of contributor out-of-state  Cox, Eddie  Contributor address; City; State; Zip Code                             |              |   |                | Amount of Contribution (\$)                        | \$100.00    |
|   |                               | Universal City, TX 78148  |              |   |                |  |             |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)<br>rd   |              | Employer (See Instructions Not Employed | 5)             |  |             |
|   | Date<br>10/16/2024            | Craven, Jessica   |              | )                                       |                | Amount of Contribution (\$)                        | \$20.00     |
|   | Principal occu<br>Organizer   | pation / Job title (See Instructions)   |              | Employer (See Instructions<br>Self      | s)             |  |             |
|   | Date<br>10/06/2024            | Full name of contributor out-of-state Crawford, Marshall Contributor address; City; State; Zip Code Hot Springs, NC 28743 |              | )                                       |                | Amount of Contribution (\$)                        | \$10.00     |
|   |                               | pation / Job title (See Instructions)   |              | Employer (See Instructions              | 5)             |  |             |
|   | Merchant                      |   |              | Earth Guild                             |                |  |             |

| The Instru                     | ction Guide explains how to complete this fo  | orm.  | 1              | Total pages Schedule A1:<br>Sch: 21/95 Rpt: 24/157 |           |
|--------------------------------|---|---|----------------|--|-----------|
| 2 FILER NAME<br>Carranza, K    |   |   | 3              | Filer ID (Ethics Commission 00087920               | n Filers) |
| 4 Date 10/17/2024              | Full name of contributor  |   | 7              | Amount of Contribution (\$)                        | \$18.18   |
|                                | Hot Springs, NC 28743   |   |                |  |           |
| 8 Principal occu<br>Merchant   | upation / Job title (See Instructions)  | 9 Employer (See Instructions<br>Earth Guild       | s)             |  |           |
| Date<br>10/17/2024             | Full name of contributor out-of-state PAC (ID#:Cullen, Tom  Contributor address; City; State; Zip Code        |   |                | Amount of Contribution (\$)                        | \$5.00    |
| Deinging Loop                  | Blue Point, NY 11715  | Franks or (Cooks backs of in                      |                |  |           |
| Clerk                          | upation / Job title (See Instructions)  | Employer (See Instructions USPS                   | S)             |  |           |
| Date<br>10/25/2024             | Full name of contributor  |   |                | Amount of Contribution (\$)                        | \$100.00  |
|                                | San Antonio, TX 78249   |   |                |  |           |
| Principal occu<br>Union Presid | upation / Job title (See Instructions) dent   | Employer (See Instructions Bexar Co Federation of |                | achers   |           |
| Date<br>09/28/2024             | Full name of contributor out-of-state PAC (ID#: Currie, Carlton  Contributor address; City; State; Zip Code   |   |                | Amount of Contribution (\$)                        | \$100.00  |
| Principal occu                 | Houston, TX 77063  upation / Job title (See Instructions)   | Employer (See Instructions                        | s)             |  |           |
| Date<br>10/16/2024             | Full name of contributor out-of-state PAC (ID#: Czajkowski, Joseph Contributor address; City; State; Zip Code |   |                | Amount of Contribution (\$)                        | \$200.00  |
| Principal occu                 | Phoenix, AZ 85004 upation / Job title (See Instructions)  | Employer (See Instructions                        | <u> </u><br>s) |  |           |
| Developmer                     | nt Director   | Democratic Mayors Ass                             | soc            | iation   |           |

|   | MONET                         | ARY POLITICAL CON  | NTRIBUTION                       | S                                       |          | SCHEDULE   | <b>■ A1</b> |
|---|-------------------------------|--|----------------------------------|---|----------|--|-------------|
|   | The Instruc                   | ction Guide explains how to c  | complete this forr               | n.                                      | 1        | Total pages Schedule A1:<br>Sch: 22/95 Rpt: 25/157 |             |
| 2 | FILER NAME<br>Carranza, Kr    | istian   |                                  |   | 3        | Filer ID (Ethics Commission 00087920               | ı Filers)   |
| 4 | Date 10/01/2024               | DasGupta, Bhaskar  | ut-of-state PAC (ID#:            |   | 7        | Amount of Contribution (\$)                        | \$5.00      |
|   |                               | Chicago, IL 60607  | i                                |   |          |  |             |
| 8 | Principal occu<br>Professor   | pation / Job title (See Instructions)  | 9                                | Employer (See Instructions UIC          | 5)       |  |             |
|   | Date<br>10/12/2024            | Full name of contributor   |                                  |   |          | Amount of Contribution (\$)                        | \$6.00      |
|   | Principal occu                | Chicago, IL 60607 pation / Job title (See Instructions)  |                                  | Employer (See Instructions              | )<br>    |  |             |
|   | Professor                     | pation 7 300 title (See Instructions)  |                                  | UIC                                     | ')       |  |             |
|   | Date<br>10/07/2024            | Full name of contributor   | ut-of-state PAC (ID#:<br>ip Code | )                                       |          | Amount of Contribution (\$)                        | \$20.00     |
|   |                               | Richmond, TX 77469   |                                  |   |          |  |             |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)<br>rd  |                                  | Employer (See Instructions Not Employed | i)       |  |             |
|   | Date<br>10/08/2024            | Full name of contributor on Davis, Jennifer  Contributor address; City; State; Z  Austin, TX 78728 | ut-of-state PAC (ID#:            |   |          | Amount of Contribution (\$)                        | \$2.09      |
|   | Principal occu<br>Self        | pation / Job title (See Instructions)  |                                  | Employer (See Instructions Pilgrimage   | <u>(</u> |  |             |
|   | Date<br>10/25/2024            | Full name of contributor of Davis, Warren  Contributor address; City; State; Z                     | ut-of-state PAC (ID#:            | )                                       |          | Amount of Contribution (\$)                        | \$10.00     |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)  |                                  | Employer (See Instructions Not Employed | <u> </u> |  |             |
|   |                               |  | ı                                |   |          |  |             |

|   | MONET                      | ARY POLITICAL CONTR   | RIBUTION       | S                          |        | SCHEDUL  | E A1       |
|---|----------------------------|---|----------------|----------------------------|--------|--|------------|
|   | The Instruc                | ction Guide explains how to comp  | lete this form | n.                         | 1      | Total pages Schedule A1:<br>Sch: 23/95 Rpt: 26/157 |            |
| 2 | FILER NAME<br>Carranza, Kr | istian  |                |                            | 3      | Filer ID (Ethics Commission 00087920               | n Filers)  |
| 4 | Date<br>10/07/2024         | <ul> <li>Full name of contributor  out-of-st</li> <li>Day, Edward R</li> <li>Contributor address; City; State; Zip Coc</li> </ul> |                |                            | 7      | Amount of Contribution (\$)                        | \$250.00   |
| 8 | Principal occur            | San Antonio, TX 78210 pation / Job title (See Instructions)   | lg             | Employer (See Instructions | :)<br> |  |            |
| Ū | Not Employe                |   |                | Not Employed               | ',     |  |            |
|   | Date<br>10/06/2024         | Full name of contributor out-of-st Delaney, Elizabeth L Contributor address; City; State; Zip Cod                                 | ate PAC (ID#:  | )                          |        | Amount of Contribution (\$)                        | \$50.00    |
|   | Dringing aggr              | Arlington, MA 02474   |                | Employer (See Instructions | ·,     |  |            |
|   | Not Employe                | pation / Job title (See Instructions)<br>d  |                | Not Employed               | )      |  |            |
|   | Date<br>10/02/2024         | Full name of contributor out-of-st Democracy Engine Contributor address; City; State; Zip Cod                                     | ate PAC (ID#:  | )                          |        | Amount of Contribution (\$)                        | \$1,830.12 |
|   |                            | Washington, DC 20001  |                |                            |        |  |            |
|   | Principal occu             | pation / Job title (See Instructions)   |                | Employer (See Instructions | 5)     |  |            |
|   | Date<br>10/09/2024         | Democracy Engine  |                | )                          |        | Amount of Contribution (\$)                        | \$226.96   |
|   | Principal occu             | pation / Job title (See Instructions)   |                | Employer (See Instructions | 5)     |  |            |
|   | Date<br>10/16/2024         | Full name of contributor out-of-st Democracy Engine  Contributor address; City; State; Zip Coo  Washington, DC 20001              | ate PAC (ID#:  |                            |        | Amount of Contribution (\$)                        | \$333.45   |
|   | Principal occu             | pation / Job title (See Instructions)   |                | Employer (See Instructions | 5)     |  |            |
|   |                            |   | 1              |                            |        |  |            |

|   | MONET                         | ARY POLITICAL CONTRIBUTION   | ONS                                     |                     | SCHEDULI   | <b>■ A1</b> |
|---|-------------------------------|--|---|---------------------|--|-------------|
|   | The Instru                    | ction Guide explains how to complete this  | form.                                   | 1                   | Total pages Schedule A1:<br>Sch: 24/95 Rpt: 27/157 |             |
| 2 | FILER NAME<br>Carranza, Kı    | istian   |   | 3                   | Filer ID (Ethics Commission 00087920               | Filers)     |
| 4 | Date<br>10/23/2024            | <ul> <li>Full name of contributor</li></ul>  |   | 7                   | Amount of Contribution (\$)                        | \$228.96    |
| _ | Deireciant                    | Washington, DC 20001   | D. Frankrick (Co. Instruction           | $\overline{\Gamma}$ |  |             |
| 8 | Principal occu                | pation / Job title (See Instructions)  | 9 Employer (See Instructions            | 5)                  |  |             |
|   | Date<br>10/03/2024            | Full name of contributor out-of-state PAC (ID#: DerHagopian, Paul Contributor address; City; State; Zip Code                       |   |                     | Amount of Contribution (\$)                        | \$3.00      |
|   | Principal occu                | Miami, FL 33155 pation / Job title (See Instructions)  | Employer (See Instructions              | ;)<br>              |  |             |
|   | Benefits Adn                  |  | Serco NA                                | ')                  |  |             |
|   | Date<br>10/02/2024            | Full name of contributor  out-of-state PAC (ID#: Devore, Michael  Contributor address; City; State; Zip Code                       |   |                     | Amount of Contribution (\$)                        | \$2.50      |
|   |                               | Naperville, IL 60540   |   | <u> </u>            |  |             |
|   | Not Employe                   | pation / Job title (See Instructions)<br>ed  | Employer (See Instructions Not Employed | <del></del>         |  |             |
|   | Date<br>10/23/2024            | Full name of contributor out-of-state PAC (ID#: Devore, Michael Contributor address; City; State; Zip Code Naperville, IL 60540    |   |                     | Amount of Contribution (\$)                        | \$9.09      |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)  | Employer (See Instructions Not Employed | <u> </u><br>5)      |  |             |
|   | Date<br>10/14/2024            | Full name of contributor out-of-state PAC (ID#: Diamond, Greg  Contributor address; City; State; Zip Code  Altadena, CA 91001-5539 |   |                     | Amount of Contribution (\$)                        | \$10.00     |
|   |                               | pation / Job title (See Instructions)  | Employer (See Instructions              |                     | ncin   |             |
|   | Salesman                      |  | Democratic Party of Wis                 |                     | 113111   |             |

|   | MONET                       | ARY POLITICAL CONTRIBU   | UTION    | IS   |                | SCHEDUL  | E <b>A1</b> |
|---|-----------------------------|--|----------|--|----------------|--|-------------|
|   | The Instruc                 | ction Guide explains how to complete   | this for | n.   | 1              | Total pages Schedule A1:<br>Sch: 25/95 Rpt: 28/157 |             |
| 2 | FILER NAME<br>Carranza, Kr  | istian   |          |  | 3              | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date<br>10/26/2024          | <ul> <li>Full name of contributor  out-of-state PA Diehl, D L Chris</li> <li>Contributor address; City; State; Zip Code</li> </ul> |          | )  | 7              | Amount of Contribution (\$)                        | \$10.00     |
|   |                             | Mercer Island, WA 98040  |          |  |                |  |             |
| 8 | Principal occu<br>Physician | pation / Job title (See Instructions)  | 9        | Employer (See Instructions<br>Group Health Permane |                |  |             |
|   | Date<br>10/06/2024          | Full name of contributor out-of-state PA Diiorio, Patrick  Contributor address; City; State; Zip Code  Katy, TX 77493              |          | )  |                | Amount of Contribution (\$)                        | \$50.00     |
|   |                             | pation / Job title (See Instructions)  |          | Employer (See Instructions                         | 5)             |  |             |
|   | Not Employe                 |  |          | Not Employed                                       | _              |  |             |
|   | Date<br>10/08/2024          | Full name of contributor out-of-state PA Dikelsky, Alexander  Contributor address; City; State; Zip Code                           |          |  | •              | Amount of Contribution (\$)                        | \$1.16      |
|   | Principal occu              | Seattle, WA 98121 pation / Job title (See Instructions)  |          | Employer (See Instructions                         | s)<br>         |  |             |
|   | Software De                 |  |          | Bayer AG   | ,              |  |             |
|   | Date<br>10/11/2024          | Full name of contributor out-of-state PA Dilley, Douglas  Contributor address; City; State; Zip Code  San Antonio, TX 78210        |          | )  |                | Amount of Contribution (\$)                        | \$100.00    |
|   | Principal occu<br>Attorney  | pation / Job title (See Instructions)  |          | Employer (See Instructions Dilley Law Firm         | <u>I</u><br>S) |  |             |
|   | Date<br>10/11/2024          | Full name of contributor out-of-state PA  Dockery, Debra  Contributor address; City; State; Zip Code  San Antonio, TX 78223        |          | )  |                | Amount of Contribution (\$)                        | \$99.00     |
|   | Principal occu<br>Architect | pation / Job title (See Instructions)  |          | Employer (See Instructions Debra J Dockery Archite |                | PC   |             |
|   |                             |  |          |  |                |  |             |

|   | MONET                         | ARY POLITICAL CONTRIBUT   | ΓΙΟΝ        | IS                                       |                | SCHEDUL  | E <b>A1</b> |
|---|-------------------------------|---|-------------|--|----------------|--|-------------|
|   | The Instru                    | ction Guide explains how to complete thi  | is for      | m.                                       | 1              | Total pages Schedule A1:<br>Sch: 26/95 Rpt: 29/157 |             |
| 2 | FILER NAME<br>Carranza, Kı    | istian  |             |  | 3              | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date 10/11/2024               | <ul> <li>Full name of contributor</li></ul>   |             |  | 7              | Amount of Contribution (\$)                        | \$20.00     |
| _ |                               | Helotes, TX 78023   |             |  |                |  |             |
| 8 | Principal occu<br>Real Estate | pation / Job title (See Instructions)   | 9           | Employer (See Instructions Self          | 5)             |  |             |
|   | Date<br>10/18/2024            | Contributor address; City; State; Zip Code  |             | )  |                | Amount of Contribution (\$)                        | \$25.00     |
|   | Principal occu                | San Antonio, TX 78216 pation / Job title (See Instructions)   |             | Employer (See Instructions               | <br>s)         |  |             |
|   | Not Employe                   |   |             | Not Employed                             | ,              |  |             |
|   | Date<br>10/16/2024            | Full name of contributor out-of-state PAC (IDunn, Marc Contributor address; City; State; Zip Code                             | D#:         | )  | •              | Amount of Contribution (\$)                        | \$50.00     |
|   |                               | Cooper City, FL 33026   |             |  |                |  |             |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)   |             | Employer (See Instructions Not Employed  | 5)             |  |             |
|   | Date<br>10/16/2024            | Full name of contributor out-of-state PAC (I Eggers, Sarah Contributor address; City; State; Zip Code  Pasadena, CA 91101     |             |  |                | Amount of Contribution (\$)                        | \$40.00     |
|   | Principal occu<br>Therapist   | pation / Job title (See Instructions)   |             | Employer (See Instructions Self          | <u>1</u><br>S) |  |             |
|   | Date<br>10/03/2024            | Full name of contributor out-of-state PAC (I Escareno, Louis Contributor address; City; State; Zip Code San Antonio, TX 78207 | <b>D</b> #: |  |                | Amount of Contribution (\$)                        | \$100.00    |
|   | Principal occu<br>Attorney    | pation / Job title (See Instructions)   |             | Employer (See Instructions Self Employed | s)             |  |             |
|   |                               |   | •           |  |                |  |             |

|   | MONET                         | ARY POLITICAL CONTRIBUTION   | NS  |         | SCHEDUL  | E <b>A1</b> |
|---|-------------------------------|--|---|---------|--|-------------|
|   | The Instru                    | ction Guide explains how to complete this fo   | orm.  | 1       | Total pages Schedule A1:<br>Sch: 27/95 Rpt: 30/157 |             |
| 2 | FILER NAME<br>Carranza, Kr    | istian   |   | 3       | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date<br>10/13/2024            | <ul> <li>Full name of contributor</li></ul>  | )   | 7       | Amount of Contribution (\$)                        | \$200.00    |
| 8 | Principal occu                | San Antonio, TX 78210 pation / Job title (See Instructions)  | 9 Employer (See Instructions                      | )<br>() |  |             |
|   | Date 10/15/2024               | Full name of contributor   |   |         | Amount of Contribution (\$)                        | \$100.00    |
|   |                               | Contributor address; City; State; Zip Code  Austin, TX 78745   |   |         |  |             |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)<br>ed  | Employer (See Instructions<br>Not Employed        | i)      |  |             |
|   | Date<br>10/02/2024            | Full name of contributor out-of-state PAC (ID#:_<br>Estes, Amy  Contributor address; City; State; Zip Code |   |         | Amount of Contribution (\$)                        | \$50.00     |
|   | Dringing Loggy                | Austin, TX 78704   | Employer (Con Instructions                        |         |  |             |
|   | Admin                         | pation / Job title (See Instructions)  | Employer (See Instructions UTSA                   | •)      |  |             |
|   | Date<br>10/09/2024            | Full name of contributor   | )   |         | Amount of Contribution (\$)                        | \$150.00    |
|   |                               | Katy, TX 77449 pation / Job title (See Instructions) ions Director   | Employer (See Instructions Harris County Democrat |         | Party  |             |
|   | Date<br>10/12/2024            | Full name of contributor out-of-state PAC (ID#:_Faust, Susan  Contributor address; City; State; Zip Code   | )   |         | Amount of Contribution (\$)                        | \$100.00    |
|   | Principal occu                | Bellaire, TX 77401 pation / Job title (See Instructions)   | Employer (See Instructions                        | :)      |  |             |
|   | Not Employe                   |  | None  |         |  |             |
|   |                               |  |   | _       |  |             |

|   | MONET                         | ARY POLITICAL CONTRIBUTION  | ON  | IS                                      |                | SCHEDUL  | E <b>A1</b> |
|---|-------------------------------|---|-----|---|----------------|--|-------------|
|   | The Instru                    | ction Guide explains how to complete this   | for | m.                                      | 1              | Total pages Schedule A1:<br>Sch: 28/95 Rpt: 31/157 |             |
| 2 | FILER NAME<br>Carranza, Kr    | istian  |     |   | 3              | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date<br>10/10/2024            | <ul> <li>Full name of contributor  out-of-state PAC (ID#: Fine, Mary Ellen</li> <li>Contributor address; City; State; Zip Code</li> </ul> |     | )                                       | 7              | Amount of Contribution (\$)                        | \$4.16      |
| • | Dringing Loon                 | Austin, TX 78745  | ام  | Employer (Coa Instructions              | <u></u>        |  |             |
| 8 | Retired                       | pation / Job title (See Instructions)   | 9   | Employer (See Instructions None         | 5)             |  |             |
|   | Date<br>10/18/2024            | Full name of contributor  out-of-state PAC (ID#: Florek, Julia Contributor address; City; State; Zip Code                                 |     | )                                       |                | Amount of Contribution (\$)                        | \$10.00     |
|   | Principal occu                | Houston, TX 77030 pation / Job title (See Instructions)   | _   | Employer (See Instructions              | <u>''</u>      |  |             |
|   | Teacher                       | pation / Job title (See Instructions)   |     | CCISD                                   | ·)             |  |             |
|   | Date<br>10/13/2024            | Full name of contributor  out-of-state PAC (ID#: Flores, Juan  Contributor address; City; State; Zip Code                                 | :   | )                                       |                | Amount of Contribution (\$)                        | \$25.00     |
|   |                               | San Antonio, TX 78250   |     |   |                |  |             |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)<br>d  |     | Employer (See Instructions Not Employed | 5)             |  |             |
|   | Date<br>09/29/2024            | Full name of contributor out-of-state PAC (ID#: Fowles, Nicole Contributor address; City; State; Zip Code  Helotes, TX 78023              |     | )                                       |                | Amount of Contribution (\$)                        | \$25.00     |
|   | Principal occu<br>Manager     | pation / Job title (See Instructions)   | T   | Employer (See Instructions City         | <u>l</u><br>S) |  |             |
|   | Date<br>10/02/2024            | Full name of contributor out-of-state PAC (ID#: Foxhall, Irene  Contributor address; City; State; Zip Code  Houston, TX 77006             |     |   |                | Amount of Contribution (\$)                        | \$500.00    |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)<br>d  |     | Employer (See Instructions Not Employed | 5)             |  |             |
|   |                               |   | 1   |   |                |  |             |

|   | MONET                       | ARY POLITICAL CONTRIBUT   | ΓΙΟΝ   | IS  |         | SCHEDUL  | E <b>A1</b> |
|---|-----------------------------|---|--------|---|---------|--|-------------|
|   | The Instruc                 | ction Guide explains how to complete th   | is for | m.  | 1       | Total pages Schedule A1:<br>Sch: 29/95 Rpt: 32/157 |             |
| 2 | FILER NAME<br>Carranza, Kr  | istian  |        |   | 3       | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date 09/27/2024             | <ul> <li>Full name of contributor  out-of-state PAC (I Foxvog, Mark</li> <li>Contributor address; City; State; Zip Code</li> </ul>  |        |   | 7       | Amount of Contribution (\$)                        | \$101.88    |
| 8 | Principal occu              | Round Lake, IL 60073 pation / Job title (See Instructions)  | 9      | Employer (See Instructions                        | <br>s)  |  |             |
|   | Not Employe                 | d   |        | Not Employed                                      |         |  |             |
|   | Date<br>10/20/2024          | Contributor address; City; State; Zip Code  |        |   | •       | Amount of Contribution (\$)                        | \$25.00     |
|   | Delevieral                  | Holualoa, HI 96725  |        | Formula and (One I hadron the one                 | <u></u> |  |             |
|   | Not Employe                 | pation / Job title (See Instructions)   |        | Employer (See Instructions Not Employed           | 5)      |  |             |
|   | Date                        | Full name of contributor out-of-state PAC (I  | ID#:   | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \             | _       | Amount of Contribution (\$)                        |             |
|   | 10/13/2024                  | Fumat, Xavier  Contributor address; City; State; Zip Code   |        |   |         | (,)  | \$5.00      |
|   |                             | Los Angeles, CA 90042   |        |   |         |  |             |
|   | Principal occu<br>Printer   | pation / Job title (See Instructions)   |        | Employer (See Instructions<br>Gemini GEL          | s)      |  |             |
|   | Date<br>10/08/2024          | Full name of contributor out-of-state PAC (I<br>Gaarder, Kirsten<br>Contributor address; City; State; Zip Code<br>Modesto, CA 95356 |        | )   |         | Amount of Contribution (\$)                        | \$2.50      |
|   | Principal occu<br>Physician | pation / Job title (See Instructions)   |        | Employer (See Instructions Modesto Radiological M |         | ical Group   |             |
|   | Date<br>10/06/2024          | Full name of contributor out-of-state PAC (I<br>Galvan, Eva<br>Contributor address; City; State; Zip Code<br>San Antonio, TX 78229  |        |   |         | Amount of Contribution (\$)                        | \$25.00     |
|   |                             | pation / Job title (See Instructions)   |        | Employer (See Instructions                        | 5)      |  |             |
|   | Physician                   |   |        | UT Health San Antonio                             |         |  |             |
|   |                             |   |        |   |         |  |             |

|   | MONET                          | ARY POLITICAL C   | ONTRIBUTION            | NS  |         | SCHEDUL  | E <b>A1</b> |
|---|--------------------------------|---|------------------------|---|---------|--|-------------|
|   | The Instru                     | ction Guide explains how  | to complete this for   | m.  | 1       | Total pages Schedule A1:<br>Sch: 30/95 Rpt: 33/157 |             |
| 2 | FILER NAME<br>Carranza, Kr     | istian  |                        |   | 3       | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date 10/10/2024                | <ul><li>5 Full name of contributor<br/>Garay, Monica</li><li>6 Contributor address; City; Sta</li></ul> | out-of-state PAC (ID#: |   | 7       | Amount of Contribution (\$)                        | \$26.00     |
| _ | Deignaignal                    | Silver Spring, MD 20910   | lo.                    | Franks ou (Cook body stier  | <u></u> |  |             |
| 8 | Legislative D                  | pation / Job title (See Instructions)<br>pirector   | 9                      | Employer (See Instruction Congress  | S)      |  |             |
|   | Date<br>10/10/2024             | Full name of contributor Garcia, Jesse Contributor address; City; Sta San Antonio, TX 78240             |                        |   |         | Amount of Contribution (\$)                        | \$50.00     |
|   | Principal occu                 | pation / Job title (See Instructions)   |                        | Employer (See Instruction   | s)      |  |             |
|   | Insurance Br                   | oker  |                        | Jesse P Garcia  |         |  |             |
|   | Date<br>10/06/2024             | Full name of contributor Genecov, Lisa Contributor address; City; Sta                                   | out-of-state PAC (ID#: | )   |         | Amount of Contribution (\$)                        | \$100.00    |
|   |                                | Dallas, TX 75229  |                        |   |         |  |             |
|   | Principal occu<br>Not Employe  | pation / Job title (See Instructions)   |                        | Employer (See Instruction Not Employed  | s)      |  |             |
|   | Date<br>10/17/2024             | Full name of contributor Geppert, Lance Contributor address; City; Sta                                  | out-of-state PAC (ID#: | )   |         | Amount of Contribution (\$)                        | \$25.00     |
|   | Principal occu<br>Attorney     | pation / Job title (See Instructions)   |                        | Employer (See Instruction Self  | s)      |  |             |
|   | Date<br>09/28/2024             | Full name of contributor Geretz, Elizabeth Contributor address; City; Sta                               | out-of-state PAC (ID#: |   |         | Amount of Contribution (\$)                        | \$50.00     |
|   | Principal occu<br>Project Mana | pation / Job title (See Instructions)   |                        | Employer (See Instruction<br>Harris County Precinct   |         |  |             |
|   | . rejest mane                  | <del></del>   |                        | Journal of the second o | •       |  |             |

|   | MONET                          | ARY POLITICAL CONTRIBUTION   | ONS  |          | SCHEDULE   | A1        |
|---|--------------------------------|--|--|----------|--|-----------|
|   | The Instru                     | ction Guide explains how to complete this f  | orm.   | 1        | Total pages Schedule A1:<br>Sch: 31/95 Rpt: 34/157 |           |
| 2 | FILER NAME<br>Carranza, Kr     | istian   |  | 3        | Filer ID (Ethics Commission 00087920               | Filers)   |
| 4 | Date<br>10/24/2024             | <ul> <li>Full name of contributor</li></ul>  | )  | 7        | Amount of Contribution (\$) \$                     | 51,000.00 |
| 8 | Principal occu                 | Washington, DC 20091 pation / Job title (See Instructions)   | 9 Employer (See Instructions                         | <u> </u> |  |           |
| _ | Date 10/25/2024                | Full name of contributor out-of-state PAC (ID#:_ Gilbert, Mary Contributor address; City; State; Zip Code Sonoma, CA 95476           |  |          | Amount of Contribution (\$)                        | \$3.00    |
|   | Principal occu<br>Not Employe  | pation / Job title (See Instructions)  | Employer (See Instructions Not Employed              | 5)       |  |           |
|   | Date<br>10/06/2024             | Full name of contributor out-of-state PAC (ID#:_ Gillespie, wardell Contributor address; City; State; Zip Code Schertz, TX 78154     |  |          | Amount of Contribution (\$)                        | \$50.00   |
|   | Principal occu<br>Not Employe  | pation / Job title (See Instructions)  | Employer (See Instructions Not Employed              | <u> </u> |  |           |
|   | Date<br>10/15/2024             | Full name of contributor out-of-state PAC (ID#:_ Glassner, Sharon Contributor address; City; State; Zip Code  Morton Grove, IL 60053 | )  |          | Amount of Contribution (\$)                        | \$3.00    |
|   | Principal occu<br>Not Employe  | pation / Job title (See Instructions)  | Employer (See Instructions None                      | ()       |  |           |
|   | Date<br>10/09/2024             | Full name of contributor out-of-state PAC (ID#:_ Godfrey, Justin Contributor address; City; State; Zip Code  Austin, TX 78721        | )  |          | Amount of Contribution (\$)                        | \$50.00   |
|   | Principal occu<br>Vice Preside | pation / Job title (See Instructions)<br>nt/Treasurer  | Employer (See Instructions<br>Barilla Management Inc |          |  |           |
|   |                                |  |  |          |  |           |

|   | MONET                         | ARY POLITICAL (  | CONTRIBUTIO             | N<br>_ | IS<br>   |         | SCHEDUL  | E <b>A1</b> |
|---|-------------------------------|--|-------------------------|--------|--|---------|--|-------------|
|   | The Instru                    | ction Guide explains hov   | to complete this fo     | orr    | n.   | 1       | Total pages Schedule A1:<br>Sch: 32/95 Rpt: 35/157 |             |
| 2 | FILER NAME<br>Carranza, Kr    | istian   |                         |        |  | 3       | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date<br>10/06/2024            | <ul><li>5 Full name of contributor<br/>Goerner, Jon</li><li>6 Contributor address; City; S</li></ul> | out-of-state PAC (ID#:_ |        | )  | 7       | Amount of Contribution (\$)                        | \$10.00     |
|   |                               | Dallas, TX 75205   | . 1                     |        |  |         |  |             |
| 8 | Principal occu<br>Not Employe | pation / Job title (See Instructions<br>ed   | s)<br>                  | 9      | Employer (See Instructions Not Employed          | 5)      |  |             |
|   | Date<br>09/28/2024            | Full name of contributor Goldman, Peter Contributor address; City; S                                 |                         |        | )  | •       | Amount of Contribution (\$)                        | \$5.00      |
|   | Dringing oggu                 | Portland, ME 04101   | s)                      |        | Employer (See Instructions                       | <u></u> |  |             |
|   | Attorney                      | pation / Job title (See Instructions   | o)<br>                  |        | Employer (See Instructions Self                  | ·)      |  |             |
|   | Date<br>10/16/2024            | Full name of contributor Gomez, Eric Contributor address; City; S                                    | out-of-state PAC (ID#:_ |        | )  |         | Amount of Contribution (\$)                        | \$20.00     |
|   |                               | San Antonio, TX 78223  |                         |        |  |         |  |             |
|   | Principal occu<br>Router      | pation / Job title (See Instructions   | s)<br>                  |        | Employer (See Instructions Saferide Health       | s)      |  |             |
|   | Date<br>10/10/2024            | Full name of contributor Gonzalez, Charles Contributor address; City; S San Antonio, TX 78212        | out-of-state PAC (ID#:_ |        | )  |         | Amount of Contribution (\$)                        | \$150.00    |
|   | Principal occu<br>Attorney    | pation / Job title (See Instructions   | 5)                      |        | Employer (See Instructions Ogletree Deakins P.C. | s)      |  |             |
|   | Date<br>10/16/2024            | Full name of contributor Gonzalez Falla, Celso Contributor address; City; S San Antonio, TX 78205    | out-of-state PAC (ID#:_ |        |  |         | Amount of Contribution (\$)                        | \$250.00    |
|   | Principal occu<br>Attorney    | pation / Job title (See Instructions   | 5)                      |        | Employer (See Instructions Self                  | s)      |  |             |
|   |                               |  |                         |        |  |         |  |             |

|   | MONET                         | ARY POLITICAL CONT  | TRIBUTION          | S  |        | SCHEDUL  | E <b>A1</b> |
|---|-------------------------------|---|--------------------|--|--------|--|-------------|
|   | The Instruc                   | ction Guide explains how to co                                    | mplete this forr   | n.   | 1      | Total pages Schedule A1:<br>Sch: 33/95 Rpt: 36/157 |             |
| 2 | FILER NAME<br>Carranza, Kr    | istian  |                    |  | 3      | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date<br>10/08/2024            | Goodman, John  6 Contributor address; City; State; Zip            | of-state PAC (ID#: | )  | 7      | Amount of Contribution (\$)                        | \$100.00    |
| 8 | Principal occu                | Houston, TX 77084  pation / Job title (See Instructions)          | 9                  | Employer (See Instructions                 | <br>;) |  |             |
|   | Not Employe                   | d   |                    | Not Employed                               |        |  |             |
|   | Date<br>10/17/2024            | Goodman, John  Contributor address; City; State; Zip              | of-state PAC (ID#: |  |        | Amount of Contribution (\$)                        | \$150.00    |
|   | Principal occur               | Houston, TX 77084 pation / Job title (See Instructions)           |                    | Employer (See Instructions                 | :)<br> |  |             |
|   | Not Employe                   |   |                    | Not Employed                               | ')     |  |             |
|   | Date<br>10/25/2024            | Full name of contributor out-out-out-out-out-out-out-out-out-out- | of-state PAC (ID#: |  |        | Amount of Contribution (\$)                        | \$100.00    |
|   |                               | Taylor, TX 76574  |                    |  |        |  |             |
|   | Principal occu                | pation / Job title (See Instructions)                             |                    | Employer (See Instructions                 | 5)     |  |             |
|   | Date<br>09/30/2024            | Grissom, Shelli   | of-state PAC (ID#: | )  |        | Amount of Contribution (\$)                        | \$10.00     |
|   | Principal occu<br>Not Employe | oation / Job title (See Instructions)<br>d                        |                    | Employer (See Instructions<br>Not Employed | 5)     |  |             |
|   | Date<br>10/16/2024            | Grodd, Kate   | of-state PAC (ID#: |  |        | Amount of Contribution (\$)                        | \$5.00      |
|   |                               | pation / Job title (See Instructions)                             |                    | Employer (See Instructions                 | 5)     |  |             |
|   | Content Crea                  | aloi  |                    | Freelance                                  |        |  |             |

|   | MONET                           | ARY POLITICAL CONTRIBUTION   | 7(  | IS  |                     | SCHEDULI   | E <b>A1</b> |
|---|---------------------------------|--|-----|---|---------------------|--|-------------|
|   | The Instruc                     | ction Guide explains how to complete this fo   | orı | m.  | 1                   | Total pages Schedule A1:<br>Sch: 34/95 Rpt: 37/157 |             |
| 2 | FILER NAME<br>Carranza, Kr      | istian   |     |   | 3                   | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date 09/27/2024                 | <ul> <li>Full name of contributor</li></ul>  |     | )   | 7                   | Amount of Contribution (\$)                        | \$100.00    |
| _ | Delicalization                  | San Diego, CA 92110  | _   | Fanda an (Carlos bastos tiana                     | $\overline{\Gamma}$ |  |             |
| 8 | Attorney                        | pation / Job title (See Instructions)  | 9   | Employer (See Instructions San Diego Unified Port |                     | trict  |             |
|   | Date<br>09/27/2024              | Contributor address; City; State; Zip Code   |     | )   |                     | Amount of Contribution (\$)                        | \$25.00     |
|   | Principal occu                  | New York, NY 10003 pation / Job title (See Instructions)   |     | Employer (See Instructions                        | <u> </u><br>;)      |  |             |
|   | Psychologist                    |  |     | Self Employed                                     | ,                   |  |             |
|   | Date<br>10/05/2024              | Full name of contributor out-of-state PAC (ID#:_<br>Halff, Danna<br>Contributor address; City; State; Zip Code                       |     | )   |                     | Amount of Contribution (\$)                        | \$50.00     |
|   |                                 | San Antonio, TX 78209  |     |   |                     |  |             |
|   | Principal occu<br>Legislative A | pation / Job title (See Instructions)<br>ide   |     | Employer (See Instructions<br>State of Texas      | 5)                  |  |             |
|   | Date<br>09/29/2024              | Full name of contributor out-of-state PAC (ID#:_<br>Hamby, John  Contributor address; City; State; Zip Code  Pompano Beach, FL 33062 |     |   |                     | Amount of Contribution (\$)                        | \$3.00      |
|   | Principal occu<br>Retired       | pation / Job title (See Instructions)  |     | Employer (See Instructions None                   | 5)                  |  |             |
|   | Date<br>10/02/2024              | Full name of contributor out-of-state PAC (ID#:_<br>Hansen, Paul  Contributor address; City; State; Zip Code  Austin, TX 78727-6870  |     | )   |                     | Amount of Contribution (\$)                        | \$10.00     |
|   | Principal occu<br>Software En   | pation / Job title (See Instructions)  |     | Employer (See Instructions National Instruments   | 5)                  |  |             |
|   | Soluvaio Eli                    | g  |     | TAGOTA HOUGHORD                                   |                     |  |             |

|   | MONET                         | ARY POLITICAL CON  | ITRIBUTION                       | S  |          | SCHEDUL  | E <b>A1</b> |
|---|-------------------------------|--|----------------------------------|--|----------|--|-------------|
|   | The Instruc                   | ction Guide explains how to c  | omplete this form                | n.   | 1        | Total pages Schedule A1:<br>Sch: 35/95 Rpt: 38/157 |             |
| 2 | FILER NAME<br>Carranza, Kr    | istian   |                                  |  | 3        | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date<br>10/06/2024            | Hare, Stacie   | ıt-of-state PAC (ID#:<br>p Code  |  | 7        | Amount of Contribution (\$)                        | \$50.00     |
| 8 | Principal occu                | New York, NY 10025 pation / Job title (See Instructions)   | la la                            | Employer (See Instructions                 |          |  |             |
| Ü | Social Worke                  |  | ľ                                | Share Our Strength                         | ')       |  |             |
|   | Date 09/30/2024               | Harper, Chris  Contributor address; City; State; Zi  |                                  | )  |          | Amount of Contribution (\$)                        | \$25.00     |
|   | Principal occu                | San Antonio, TX 78247 pation / Job title (See Instructions)  |                                  | Employer (See Instructions                 | <u>.</u> |  |             |
|   | Not Employe                   |  |                                  | Not Employed                               | ,        |  |             |
|   | Date<br>10/13/2024            | Full name of contributor ou<br>Harper, Chris<br>Contributor address; City; State; Zi                         | ut-of-state PAC (ID#:<br>ip Code | )  |          | Amount of Contribution (\$)                        | \$25.00     |
|   |                               | San Antonio, TX 78247  |                                  |  |          |  |             |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)<br>ed  |                                  | Employer (See Instructions<br>Not Employed | i)       |  |             |
|   | Date<br>10/17/2024            | Full name of contributor ou Dartfield, Edward  Contributor address; City; State; Zites San Antonio, TX 78210 | ut-of-state PAC (ID#:<br>ip Code | )  |          | Amount of Contribution (\$)                        | \$5.00      |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)  |                                  | Employer (See Instructions None            | )        |  |             |
|   | Date<br>10/06/2024            | Full name of contributor ou Hartung, Stephen  Contributor address; City; State; Zi  Deer Park, TX 77536      | it-of-state PAC (ID#:            | )  |          | Amount of Contribution (\$)                        | \$120.00    |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)  |                                  | Employer (See Instructions Not Employed    | 5)       |  |             |
|   |                               |  | •                                |  |          |  |             |

|          | MONET                         | ARY POLITICAL CONTRIBU  | JTION          | IS  |           | SCHEDUL  | E <b>A1</b> |
|----------|-------------------------------|---|----------------|---|-----------|--|-------------|
|          | The Instruc                   | ction Guide explains how to complete t  | this for       | n.  | 1         | Total pages Schedule A1:<br>Sch: 36/95 Rpt: 39/157 |             |
| 2        | FILER NAME<br>Carranza, Kr    | istian  |                |   | 3         | Filer ID (Ethics Commissio 00087920                | n Filers)   |
| 4        | Date<br>10/13/2024            | <ul> <li>Full name of contributor</li></ul>   |                | )   | 7         | Amount of Contribution (\$)                        | \$30.00     |
| 8        | Principal occu                | Austin, TX 78722 pation / Job title (See Instructions)  | l <sub>o</sub> | Employer (See Instructions                      | <u>''</u> |  |             |
| <u> </u> | Planner                       | pation / Job title (See Instructions)   | 9              | Grantworks                                      | ·)        |  |             |
|          | Date<br>10/12/2024            | Full name of contributor  |                |   | •         | Amount of Contribution (\$)                        | \$50.00     |
|          | Principal occu                | Schertz, TX 78154 pation / Job title (See Instructions)   |                | Employer (See Instructions                      | <u>;)</u> |  |             |
|          | Retired                       | padon, oob title (ooc motastions)   |                | Self  | -,        |  |             |
|          | Date<br>10/12/2024            | Full name of contributor out-of-state PAC Heeg, Alice Contributor address; City; State; Zip Code                          | C (ID#:        | )   |           | Amount of Contribution (\$)                        | \$100.00    |
|          |                               | Schertz, TX 78154   |                |   |           |  |             |
|          | Principal occu<br>Retired     | pation / Job title (See Instructions)   |                | Employer (See Instructions Self                 | s)        |  |             |
|          | Date<br>09/28/2024            | Full name of contributor out-of-state PAC Helfrich, Joseph Contributor address; City; State; Zip Code Brunswick, ME 04011 |                | )   |           | Amount of Contribution (\$)                        | \$25.00     |
|          | Principal occu<br>Not Employe | pation / Job title (See Instructions)   |                | Employer (See Instructions<br>Not Employed      | 5)        |  |             |
|          | Date<br>10/18/2024            | Full name of contributor out-of-state PAC Hemenway, Mark Contributor address; City; State; Zip Code Charlotte, NC 28210   | (ID#:          | )   |           | Amount of Contribution (\$)                        | \$25.00     |
|          | Principal occu<br>Paralegal   | pation / Job title (See Instructions)   |                | Employer (See Instructions Geoffrey C. Hemenway |           |  |             |
|          |                               |   | l              | <u> </u>  |           |  |             |

|   | MONET                         | ARY POLITICAL CONTRIBUT   | ΓΙΟΝ   | IS                                      |        | SCHEDULI   | <b>■ A1</b> |
|---|-------------------------------|---|--------|---|--------|--|-------------|
|   | The Instru                    | ction Guide explains how to complete thi  | is for | m.                                      | 1      | Total pages Schedule A1:<br>Sch: 37/95 Rpt: 40/157 |             |
| 2 | FILER NAME<br>Carranza, Kı    | istian  |        |   | 3      | Filer ID (Ethics Commission 00087920               | ı Filers)   |
| 4 | Date<br>10/08/2024            | <ul> <li>Full name of contributor  out-of-state PAC (II Hernandez, Irene</li> <li>Contributor address; City; State; Zip Code</li> </ul> | D#:    |   | 7      | Amount of Contribution (\$)                        | \$25.00     |
|   |                               | San Antonio, TX 78260   | •      |   |        |  |             |
| 8 | Principal occu<br>Mngr        | pation / Job title (See Instructions)   | 9      | Employer (See Instructions BCDP         | 5)     |  |             |
|   | Date<br>09/28/2024            | Full name of contributor out-of-state PAC (II Hernandez, Jacob Contributor address; City; State; Zip Code                               |        | )                                       |        | Amount of Contribution (\$)                        | \$5.00      |
|   | Principal occu                | San Antonio, TX 78254 pation / Job title (See Instructions)   |        | Employer (See Instructions              | ;)<br> |  |             |
|   |                               | nd Public Health Specialist   |        | Bexar County Medical S                  |        | iety   |             |
|   | Date<br>09/30/2024            | Full name of contributor out-of-state PAC (II Hernandez, Patricia Contributor address; City; State; Zip Code                            | D#:    | )                                       |        | Amount of Contribution (\$)                        | \$10.00     |
|   |                               | Live Oak, TX 78233  |        |   |        |  |             |
|   | Principal occu<br>Retired     | pation / Job title (See Instructions)   |        | Employer (See Instructions Retired      | s)     |  |             |
|   | Date<br>09/30/2024            | Full name of contributor out-of-state PAC (II Herr, Scott Contributor address; City; State; Zip Code  Marco Island, FL 34145            |        | )                                       | •      | Amount of Contribution (\$)                        | \$15.00     |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)   |        | Employer (See Instructions Not Employed | 5)     |  |             |
|   | Date<br>10/24/2024            | Full name of contributor out-of-state PAC (II Herre, Edward Contributor address; City; State; Zip Code  New Orleans, LA 70118           |        |   | •      | Amount of Contribution (\$)                        | \$5.00      |
|   | Principal occu<br>Retired     | pation / Job title (See Instructions)   |        | Employer (See Instructions Retired      | s)     |  |             |
|   |                               |   | •      |   |        |  |             |

|   | MONET                         | ARY POLITICAL (   | S  |    | SCHEDUI  | LE <b>A1</b> |  |            |
|---|-------------------------------|---|--|----|--|--------------|--|------------|
|   | The Instru                    | ction Guide explains hov  | to complete this fo                          | rr | m.   | 1            | Total pages Schedule A1:<br>Sch: 38/95 Rpt: 41/157 |            |
| 2 | FILER NAME<br>Carranza, Kı    | ristian   |  |    |  | 3            | Filer ID (Ethics Commission 00087920               | on Filers) |
| 4 | Date<br>10/03/2024            | <ul><li>5 Full name of contributor<br/>Herrin, Rebecca</li><li>6 Contributor address; City; S</li></ul> | out-of-state PAC (ID#:                       |    |  | 7            | Amount of Contribution (\$)                        | \$25.00    |
|   |                               | Dallas, TX 75211  |  |    |  |              |  |            |
| 8 | Principal occu<br>Marketing   | pation / Job title (See Instructions  | 5)   | 9  | Employer (See Instructions Thryv                     | s)           |  |            |
|   | Date<br>10/23/2024            | Full name of contributor Herrmann, Brandon Contributor address; City; S                                 | out-of-state PAC (ID#:                       |    | )  | •            | Amount of Contribution (\$)                        | \$10.00    |
|   | Principal occu                | Dallas, TX 75214 pation / Job title (See Instructions   | <u>,                                    </u> |    | Employer (See Instructions                           | <u>''</u>    |  |            |
|   | Accounting                    | pation / 300 title (3ee instructions  | 5)   |    | Self   | ·)           |  |            |
|   | Date<br>10/13/2024            | Full name of contributor Hess, Myron Contributor address; City; S                                       | out-of-state PAC (ID#:_                      |    | )  |              | Amount of Contribution (\$)                        | \$100.00   |
|   |                               | Austin, TX 78704  |  |    |  |              |  |            |
|   | Principal occu<br>Attorney    | pation / Job title (See Instructions  | 5)   |    | Employer (See Instructions<br>Law Office of Myron He |              |  |            |
|   | Date<br>10/18/2024            | Full name of contributor Hildreth, Daniel Contributor address; City; S Falmouth, ME 04105               | out-of-state PAC (ID#:                       |    | )  |              | Amount of Contribution (\$)                        | \$1,000.00 |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions<br>ed  | 5)   |    | Employer (See Instructions Not Employed              | s)           |  |            |
|   | Date<br>10/11/2024            | Full name of contributor Hill, Hubert (Tom) Contributor address; City; S San Antonio, TX 78258          |  |    |  |              | Amount of Contribution (\$)                        | \$5.00     |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions  | s)   |    | Employer (See Instructions Not Employed              | 5)           |  |            |
|   |                               |   |  |    |  |              |  |            |

|   | MONET                      | ARY POLITICAL C   | S<br>                                   |    | SCHEDUI                                 | _E <b>A1</b> |  |            |
|---|----------------------------|---|---|----|---|--------------|--|------------|
|   | The Instru                 | ction Guide explains how  | to complete this fo                     | rn | n.                                      | 1            | Total pages Schedule A1:<br>Sch: 39/95 Rpt: 42/157 |            |
| 2 | FILER NAME<br>Carranza, Kr | istian  |   |    |   | 3            | Filer ID (Ethics Commission 00087920               | on Filers) |
| 4 | Date 10/10/2024            | <ul><li>5 Full name of contributor<br/>Hirsch, Margaret</li><li>6 Contributor address; City; St</li></ul> | out-of-state PAC (ID#:                  |    | )                                       | 7            | Amount of Contribution (\$)                        | \$1,000.00 |
| _ |                            | Dallas, TX 75209  |   |    |   | _            |  |            |
| 8 | Not Employe                | pation / Job title (See Instructions<br>ed  | )                                       |    | Employer (See Instructions Not Employed | 5)           |  |            |
|   | Date<br>10/23/2024         | Full name of contributor Hisssam, Timothy Contributor address; City; St                                   | out-of-state PAC (ID#:                  |    | )                                       | •            | Amount of Contribution (\$)                        | \$14.00    |
|   | Principal occu             | Pflugerville, TX 78660 pation / Job title (See Instructions   | )                                       |    | Employer (See Instructions              | <u> </u>     |  |            |
|   | Tax Examini                |   | ,                                       |    | IRS                                     | ,            |  |            |
|   | Date<br>10/04/2024         | Full name of contributor Hoang, Kim Ngan Contributor address; City; St                                    | out-of-state PAC (ID#:<br>ate; Zip Code |    |   | •            | Amount of Contribution (\$)                        | \$10.00    |
|   |                            | Austin, TX 78744  |   |    |   | <u>_</u>     |  |            |
|   | Self-employe               | pation / Job title (See Instructions<br>ed  | )                                       |    | Employer (See Instructions Ngan Hoang   | 5)           |  |            |
|   | Date<br>09/30/2024         | Full name of contributor Hollenshead, Todd  Contributor address; City; St  Benton, LA 71006               | out-of-state PAC (ID#:<br>ate; Zip Code |    | )                                       | -            | Amount of Contribution (\$)                        | \$5.00     |
|   | Principal occu<br>Farmer   | pation / Job title (See Instructions  | )                                       |    | Employer (See Instructions<br>Self      | 5)           |  |            |
|   | Date<br>10/07/2024         | Full name of contributor Hollenshead, Todd Contributor address; City; St Benton, LA 71006                 | out-of-state PAC (ID#:                  |    | )                                       | •            | Amount of Contribution (\$)                        | \$25.00    |
|   | Principal occu<br>Farmer   | pation / Job title (See Instructions  | )                                       |    | Employer (See Instructions Self         | s)           |  |            |
|   |                            |   |   |    |   |              |  |            |

|   | MONET                         | ARY POLITICAL CONTRIBUTION  | ΝC  | IS  |           | SCHEDUL  | E <b>A1</b> |
|---|-------------------------------|---|-----|---|-----------|--|-------------|
|   | The Instru                    | ction Guide explains how to complete this   | for | m.  | 1         | Total pages Schedule A1:<br>Sch: 40/95 Rpt: 43/157 |             |
| 2 | FILER NAME<br>Carranza, Kı    | istian  |     |   | 3         | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date 09/28/2024               | <ul> <li>Full name of contributor</li></ul>   |     | )   | 7         | Amount of Contribution (\$)                        | \$25.00     |
| _ |                               | Fredericksburg, TX 78624  | 1-  |   | _         |  |             |
| 8 | Principal occu<br>President   | pation / Job title (See Instructions)   | 9   | Employer (See Instructions CrystallinePhoenix   | 5)        |  |             |
|   | Date<br>10/09/2024            | Full name of contributor  out-of-state PAC (ID#: Howard, Robert  Contributor address; City; State; Zip Code                       |     | )   |           | Amount of Contribution (\$)                        | \$100.00    |
|   | Principal occu                | Austin, TX 78704  | _   | Employer (See Instructions                      | <u>''</u> |  |             |
|   | Consultant                    | pation / Job title (See Instructions)   |     | Robert M. Howard Inc                            | s)        |  |             |
|   | Date<br>10/08/2024            | Full name of contributor out-of-state PAC (ID#: Hull, Megan  Contributor address; City; State; Zip Code                           |     | )   | •         | Amount of Contribution (\$)                        | \$250.00    |
|   |                               | Washington, DC 20007  |     |   |           |  |             |
|   | Principal occu<br>Activist    | pation / Job title (See Instructions)   |     | Employer (See Instructions Self                 | 5)        |  |             |
|   | Date<br>10/03/2024            | Full name of contributor out-of-state PAC (ID#: Ingle, Margaret  Contributor address; City; State; Zip Code  Greensboro, NC 27408 |     | )   | •         | Amount of Contribution (\$)                        | \$20.00     |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)   |     | Employer (See Instructions Not Employed         | 5)        |  |             |
|   | Date<br>10/09/2024            | Full name of contributor out-of-state PAC (ID#: Ireland, Kiel  Contributor address; City; State; Zip Code  Pasadena, CA 91106     |     | )   |           | Amount of Contribution (\$)                        | \$16.66     |
|   | Principal occu<br>Lawyer      | pation / Job title (See Instructions)   |     | Employer (See Instructions Quinn Emanuel Urquha |           | sullivan LLP                                       |             |
|   |                               |   | •   |   |           |  |             |

|   | MONET                      | ARY POLITICAL CONT   | TRIBUTION          | S   |                | SCHEDULE   | <b>■ A1</b> |
|---|----------------------------|--|--------------------|---|----------------|--|-------------|
|   | The Instru                 | ction Guide explains how to co   | mplete this forr   | n.  | 1              | Total pages Schedule A1:<br>Sch: 41/95 Rpt: 44/157 |             |
| 2 | FILER NAME<br>Carranza, Kr | istian   |                    |   | 3              | Filer ID (Ethics Commission 00087920               | Filers)     |
| 4 | Date<br>10/02/2024         | Iskow, Lawrence  6 Contributor address; City; State; Zip                             |                    |   | 7              | Amount of Contribution (\$)                        | \$5.00      |
| 8 | Principal occu             | Gaithersburg, MD 20878 pation / Job title (See Instructions)                         | 9                  | Employer (See Instructions                  | <u> </u><br>;) |  |             |
|   | Not Employe                |  |                    | Not Employed                                | ,              |  |             |
|   | Date<br>10/19/2024         | Full name of contributor out-<br>Izzo, Nunzio  Contributor address; City; State; Zip | of-state PAC (ID#: |   |                | Amount of Contribution (\$)                        | \$5.00      |
|   | D: : 1                     | Hoboken, NJ 07030  |                    |   | Ĺ              |  |             |
|   | Not Employe                | pation / Job title (See Instructions)  |                    | Employer (See Instructions Not Employed     | 5)             |  |             |
|   | Date<br>10/11/2024         | Full name of contributor out- JOHNSON, JAMES  Contributor address; City; State; Zip  | of-state PAC (ID#: |   |                | Amount of Contribution (\$)                        | \$50.00     |
|   |                            | Dallas, TX 75218   |                    |   |                |  |             |
|   | Principal occu<br>Attorney | pation / Job title (See Instructions)  |                    | Employer (See Instructions Self             | 5)             |  |             |
|   | Date<br>10/18/2024         | Jackson, Kevin   | of-state PAC (ID#: | )   |                | Amount of Contribution (\$)                        | \$50.00     |
|   | •                          | pation / Job title (See Instructions)<br>Diagnostician                               |                    | Employer (See Instructions<br>Del Valle ISD | 5)             |  |             |
|   | Date<br>10/17/2024         | Jaklitsch, Brian   | of-state PAC (ID#: | )   |                | Amount of Contribution (\$)                        | \$4.54      |
|   |                            | pation / Job title (See Instructions)  |                    | Employer (See Instructions                  |                | _  |             |
|   | Vice Preside               | iii.   |                    | J Roderick Public Relati                    | UIIS           |  |             |

|   | MONET                         | ARY POLITICAL CO   | ONTRIBUTION                           | S  |          | SCHEDUL  | E <b>A1</b> |
|---|-------------------------------|--|---------------------------------------|--|----------|--|-------------|
|   | The Instruc                   | ction Guide explains how t   | o complete this form                  | n.   | 1        | Total pages Schedule A1:<br>Sch: 42/95 Rpt: 45/157 |             |
| 2 | FILER NAME<br>Carranza, Kr    | istian   |                                       |  | 3        | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date 09/28/2024               | <ul><li>5 Full name of contributor     Janani, Maryam</li><li>6 Contributor address; City; State</li></ul> | out-of-state PAC (ID#:e; Zip Code     | )  | 7        | Amount of Contribution (\$)                        | \$100.00    |
| _ |                               | Washington, DC 20010   | T <sub>a</sub>                        |  | _        |  |             |
| 8 | Principal occu<br>Government  | pation / Job title (See Instructions)  | 9                                     | Employer (See Instructions Department of Commerce    |          |  |             |
|   | Date<br>09/28/2024            | Full name of contributor  Jasso, Alonso  Contributor address; City; State                                  | out-of-state PAC (ID#:e; Zip Code     |  |          | Amount of Contribution (\$)                        | \$25.00     |
|   | Principal occu                | San Antonio, TX 78254 pation / Job title (See Instructions)  |                                       | Employer (See Instructions                           | <u> </u> |  |             |
|   | Not Employe                   | ed   |                                       | Not Employed   |          |  |             |
|   | Date<br>10/17/2024            | Full name of contributor  Jaworski, Joseph  Contributor address; City; State                               | out-of-state PAC (ID#:<br>e; Zip Code |  |          | Amount of Contribution (\$)                        | \$500.00    |
|   |                               | Galveston, TX 77550  |                                       |  |          |  |             |
|   | Principal occu<br>Attorney    | pation / Job title (See Instructions)  |                                       | Employer (See Instructions<br>Joseph S Jaworski PC   | )        |  |             |
|   | Date<br>10/22/2024            | Full name of contributor  Johns, Pat  Contributor address; City; State  Tampa, FL 33626                    | out-of-state PAC (ID#:e; Zip Code     | )  |          | Amount of Contribution (\$)                        | \$100.00    |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)  |                                       | Employer (See Instructions Not Employed              | 5)       |  |             |
|   | Date<br>10/02/2024            | Full name of contributor Johnson, Jack Contributor address; City; State San Antonio, TX 78212-311          |                                       | )  |          | Amount of Contribution (\$)                        | \$100.00    |
|   | Principal occu<br>CAO         | pation / Job title (See Instructions)  |                                       | Employer (See Instructions Destinations Internations |          |  |             |
|   |                               |  |                                       |  |          |  |             |

|   | MONET                         | ARY POLITICAL C   | CONTRIBUTION                            | NS  |    | SCHEDUI  | LE <b>A1</b> |
|---|-------------------------------|---|---|---|----|--|--------------|
|   | The Instru                    | ction Guide explains how  | to complete this for                    |   | 1  | Total pages Schedule A1:<br>Sch: 43/95 Rpt: 46/157 |              |
| 2 | FILER NAME<br>Carranza, Kr    | istian  |   |   | 3  | Filer ID (Ethics Commission 00087920               | on Filers)   |
| 4 | Date<br>10/13/2024            | <ul><li>5 Full name of contributor<br/>Johnson, Ray</li><li>6 Contributor address; City; St</li></ul> | out-of-state PAC (ID#:ate; Zip Code     | )   | 7  | Amount of Contribution (\$)                        | \$50.00      |
|   |                               | West Des Moines, IA 502   |   |   |    |  |              |
| 8 | Principal occu<br>Attorney    | pation / Job title (See Instructions  | ) 9                                     | Employer (See Instructions Johnson Law Firm | S) |  |              |
|   | Date<br>10/08/2024            | Full name of contributor Johnston, Benjamin Contributor address; City; St                             | out-of-state PAC (ID#:<br>ate; Zip Code |   | •  | Amount of Contribution (\$)                        | \$20.83      |
|   | Principal occu                | Austin, TX 78705 pation / Job title (See Instructions   | )                                       | Employer (See Instructions                  | s) |  |              |
|   | Librarian                     | (   | ,                                       | Austin Community Colle                      |    |  |              |
|   | Date<br>10/03/2024            | Full name of contributor Jones, Jesse Contributor address; City; St                                   | out-of-state PAC (ID#:<br>ate; Zip Code | )   |    | Amount of Contribution (\$)                        | \$100.00     |
|   |                               | Houston, TX 77019-6424  |   |   |    |  |              |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions<br>ed  | )                                       | Employer (See Instructions Not Employed     | s) |  |              |
|   | Date<br>09/28/2024            | Full name of contributor Jones, Timothy  Contributor address; City; St  Albany, NY 12205-1004         | out-of-state PAC (ID#:ate; Zip Code     |   |    | Amount of Contribution (\$)                        | \$25.00      |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions  | )                                       | Employer (See Instructions Not Employed     | 5) |  |              |
|   | Date<br>10/04/2024            | Full name of contributor Justin R. Rodriguez Camp Contributor address; City; St San Antonio, TX 78201 |   |   |    | Amount of Contribution (\$)                        | \$1,000.00   |
|   | Principal occu                | pation / Job title (See Instructions  | )                                       | Employer (See Instructions                  | 5) |  |              |
|   |                               |   | L                                       |   |    |  |              |

|   | MONET                          | ARY POLITICAL CON   | TRIBUTION             | S  |    | SCHEDUL  | E <b>A1</b> |
|---|--------------------------------|---|-----------------------|--|----|--|-------------|
|   | The Instruc                    | ction Guide explains how to co  | omplete this form     | n.   | 1  | Total pages Schedule A1:<br>Sch: 44/95 Rpt: 47/157 |             |
| 2 | FILER NAME<br>Carranza, Kr     | istian  |                       |  | 3  | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date<br>10/07/2024             | <ul> <li>Full name of contributor out</li> <li>K, A</li> <li>Contributor address; City; State; Zip</li> </ul> |                       |  | 7  | Amount of Contribution (\$)                        | \$2.27      |
| 8 | Principal occur                | Villanova, PA 19085 pation / Job title (See Instructions)   | la la                 | Employer (See Instructions                       |    |  |             |
| 0 | Not Employe                    |   | j                     | Not Employed                                     | ') |  |             |
|   | Date<br>10/08/2024             | Full name of contributor out  Katz, Farley  Contributor address; City; State; Zig                             |                       |  |    | Amount of Contribution (\$)                        | \$100.00    |
|   | Dringinal occur                | San Antonio, TX 78209 pation / Job title (See Instructions)   |                       | Employer (See Instructions                       |    |  |             |
|   | attorney                       | pation / Job title (See Instructions)   |                       | Clark Hill                                       | ') |  |             |
|   | Date<br>10/14/2024             | Full name of contributor out  Kauffman, Albert  Contributor address; City; State; Zip                         | or-of-state PAC (ID#: | )  |    | Amount of Contribution (\$)                        | \$50.00     |
|   |                                | San Antonio, TX 78201   |                       |  |    |  |             |
|   | Principal occup                | pation / Job title (See Instructions)   |                       | Employer (See Instructions St. Mary University   | i) |  |             |
|   | Date<br>10/03/2024             | Full name of contributor out  Keefer, Timothy  Contributor address; City; State; Zip  Middlebrook, VA 24459   |                       | )  |    | Amount of Contribution (\$)                        | \$5.00      |
|   | Principal occup<br>Not Employe | pation / Job title (See Instructions)   |                       | Employer (See Instructions<br>Not Employed       | 5) |  |             |
|   | Date<br>09/30/2024             | Full name of contributor out  Kennard, Karen  Contributor address; City; State; Zip  Austin, TX 78703         | :-of-state PAC (ID#:  |  |    | Amount of Contribution (\$)                        | \$250.00    |
|   | Principal occup                | pation / Job title (See Instructions)   |                       | Employer (See Instructions Greenberg Traurig LLP | )  |  |             |
|   | <u> </u>                       |   | I                     | <u>-</u>   |    |  |             |

|   | MONET                         | ARY POLITICAL CONTRIBUTI  | ON  | IS   |                | SCHEDUL  | E <b>A1</b> |
|---|-------------------------------|---|-----|--|----------------|--|-------------|
|   | The Instruc                   | ction Guide explains how to complete this   | for | m.   | 1              | Total pages Schedule A1:<br>Sch: 45/95 Rpt: 48/157 |             |
| 2 | FILER NAME<br>Carranza, Kr    | istian  |     |  | 3              | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date<br>10/04/2024            | <ul> <li>Full name of contributor  out-of-state PAC (ID# Kile, Winston</li> <li>Contributor address; City; State; Zip Code</li> </ul> |     |  | 7              | Amount of Contribution (\$)                        | \$100.00    |
| 8 | Principal occu<br>Not Employe | Houston, TX 77096-1320  pation / Job title (See Instructions)   | 9   | Employer (See Instructions Not Employed      | <u> </u><br>s) |  |             |
|   | Date<br>10/07/2024            | Full name of contributor out-of-state PAC (ID#  |     |  |                | Amount of Contribution (\$)                        | \$222.00    |
|   | Principal occu                | pation / Job title (See Instructions)   |     | Employer (See Instructions Rackspace Hosting | <u>l</u><br>s) |  |             |
|   | Date<br>10/19/2024            | Full name of contributor out-of-state PAC (ID# King, Brooke  Contributor address; City; State; Zip Code                               | t:  | )  |                | Amount of Contribution (\$)                        | \$25.00     |
|   |                               | Humble, TX 77346 pation / Job title (See Instructions)  |     | Employer (See Instructions                   | s)             |  |             |
|   | Photographe  Date  10/25/2024 | Full name of contributor out-of-state PAC (ID#  |     | Brooke King                                  |                | Amount of Contribution (\$)                        | \$1.00      |
|   | Principal occu<br>Environment | oation / Job title (See Instructions)<br>al Engineer  |     | Employer (See Instructions                   | 5)             |  |             |
|   | Date<br>09/30/2024            | Full name of contributor out-of-state PAC (ID# King, Joseph  Contributor address; City; State; Zip Code  Glen Flora, TX 77443         |     |  | •              | Amount of Contribution (\$)                        | \$10.00     |
|   | Principal occu<br>Retired     | oation / Job title (See Instructions)   |     | Employer (See Instructions None              | 5)             |  |             |
|   |                               |   |     |  |                |  |             |

|   | MONET                         | ARY POLITICAL CONTRIBI  |          | SCHEDUL                                 | E <b>A1</b> |  |           |
|---|-------------------------------|---|----------|---|-------------|--|-----------|
|   | The Instruc                   | ction Guide explains how to complete  | this for | n.                                      | 1           | Total pages Schedule A1:<br>Sch: 46/95 Rpt: 49/157 |           |
| 2 | FILER NAME<br>Carranza, Kr    | istian  |          |   | 3           | Filer ID (Ethics Commission 00087920               | n Filers) |
| 4 | Date<br>10/20/2024            | <ul> <li>Full name of contributor  out-of-state PA Kipley, Marlene</li> <li>Contributor address; City; State; Zip Code</li> </ul> |          |   | 7           | Amount of Contribution (\$)                        | \$15.00   |
| 8 | Principal occur               | Quincy, IL 62301 pation / Job title (See Instructions)  | la la    | Employer (See Instructions              | ;)<br>      |  |           |
| 0 | Not Employe                   |   | 9        | Not Employed                            | )<br>)      |  |           |
|   | Date<br>10/13/2024            | Full name of contributor out-of-state PA Kitchen`, Sara  Contributor address; City; State; Zip Code                               |          | )                                       |             | Amount of Contribution (\$)                        | \$4.16    |
|   |                               | Austin, TX 78756  |          |   | <u> </u>    |  |           |
|   | Principal occur<br>Consultant | pation / Job title (See Instructions)   |          | Employer (See Instructions TSBVI        | S)          |  |           |
|   | Date 09/27/2024               | Full name of contributor out-of-state PA Kittle, Kathleen Contributor address; City; State; Zip Code                              | AC (ID#: | )                                       |             | Amount of Contribution (\$)                        | \$20.00   |
|   |                               | Carrollton, TX 75010  |          |   |             |  |           |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)<br>ed   |          | Employer (See Instructions Not Employed | s)          |  |           |
|   | Date<br>10/17/2024            | Full name of contributor out-of-state PA Kling, Kelsey Contributor address; City; State; Zip Code  Dripping Springs, TX 78620     |          | )                                       | •           | Amount of Contribution (\$)                        | \$25.00   |
|   | Principal occu<br>Lobbyist    | pation / Job title (See Instructions)   |          | Employer (See Instructions Texas AFT    | 5)          |  |           |
|   | Date<br>09/28/2024            | Full name of contributor out-of-state PA Knittel, Philip Contributor address; City; State; Zip Code  Lord's Valley, PA 18428      |          | )                                       |             | Amount of Contribution (\$)                        | \$100.00  |
|   | Principal occu<br>Advertising | pation / Job title (See Instructions)   |          | Employer (See Instructions Unified      | 5)          |  |           |
|   |                               |   | 1        |   |             |  |           |

|   | MONET                        | ARY POLITICAL CONT  | TRIBUTION                      | S                                    |              | SCHEDUL  | E <b>A1</b> |
|---|------------------------------|---|--------------------------------|--------------------------------------|--------------|--|-------------|
|   | The Instruc                  | ction Guide explains how to co  | mplete this forr               | n.                                   | 1            | Total pages Schedule A1:<br>Sch: 47/95 Rpt: 50/157 |             |
| 2 | FILER NAME<br>Carranza, Kr   | istian  |                                |                                      | 3            | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date<br>09/28/2024           | Koprince, Karen  6 Contributor address; City; State; Zip  | of-state PAC (ID#:<br>Code     |                                      | 7            | Amount of Contribution (\$)                        | \$100.00    |
| 8 | Principal occu               | DPO, AE 09283 pation / Job title (See Instructions)   | 9                              | Employer (See Instructions           | <br>s)       |  |             |
|   | Health Office                | r   |                                | USAID                                |              |  |             |
|   | Date<br>09/27/2024           | Full name of contributor out- Kosobud, Terry  Contributor address; City; State; Zip  Austin, TX 78749 |                                |                                      |              | Amount of Contribution (\$)                        | \$100.00    |
|   | Principal occu               | pation / Job title (See Instructions)   | <del></del>                    | Employer (See Instructions           | :)<br>       |  |             |
|   | Not Employe                  |   |                                | Not Employed                         | "            |  |             |
|   | Date                         |   | of-state PAC (ID#:             | ,                                    | Г            | Amount of Contribution (\$)                        |             |
|   | 09/28/2024                   | Krolosky, Lorraine  Contributor address; City; State; Zip   |                                |                                      |              | , and an estimated (4)                             | \$15.00     |
|   |                              | Sioux Falls, SD 57104   |                                |                                      |              |  |             |
|   | ·                            | pation / Job title (See Instructions)   |                                | Employer (See Instructions           | <u> </u><br> |  |             |
|   | Truck Driver                 |   |                                | Self                                 | _            |  |             |
|   | Date<br>10/17/2024           | Kuniavsky, Mike   | of-state PAC (ID#:<br><br>Code |                                      |              | Amount of Contribution (\$)                        | \$1.25      |
|   | Principal occu<br>Researcher | pation / Job title (See Instructions)   |                                | Employer (See Instructions Accenture | 5)           |  |             |
|   | Date<br>10/04/2024           | Full name of contributor out-out-out-out-out-out-out-out-out-out-                                     | of-state PAC (ID#:             |                                      | •            | Amount of Contribution (\$)                        | \$10.00     |
|   |                              | pation / Job title (See Instructions)   |                                | Employer (See Instructions           | 5)           |  |             |
|   | Mechanical E                 | Engineer  |                                | Proplant Inc                         |              |  |             |
|   |                              |   |                                |                                      |              |  |             |

|   | MONET                         | ARY POLITICAL CONT   | RIBUTION          | S   |                | SCHEDUL  | E <b>A1</b> |
|---|-------------------------------|--|-------------------|---|----------------|--|-------------|
|   | The Instruc                   | ction Guide explains how to cor  | mplete this forr  | n.  | 1              | Total pages Schedule A1:<br>Sch: 48/95 Rpt: 51/157 |             |
| 2 | FILER NAME<br>Carranza, Kr    | istian   |                   |   | 3              | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date<br>10/11/2024            | L Gold, Dean  6 Contributor address; City; State; Zip 0                              |                   | )   | 7              | Amount of Contribution (\$)                        | \$1.25      |
| 8 | Principal occu<br>Not Employe | Baltimore, MD 21230 pation / Job title (See Instructions)                            | 9                 | Employer (See Instructions Not Employed               | <u> </u><br>;) |  |             |
|   | Date<br>10/20/2024            |  |                   | )   |                | Amount of Contribution (\$)                        | \$50.00     |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)  |                   | Employer (See Instructions Not Employed               | <u>(</u>       |  |             |
|   | Date<br>09/28/2024            | Full name of contributor out-o Laine, Marsha Contributor address; City; State; Zip 0 | f-state PAC (ID#: |   |                | Amount of Contribution (\$)                        | \$1.00      |
|   | Principal occu                | Austin, TX 78745 pation / Job title (See Instructions)                               |                   | Employer (See Instructions                            | <u> </u>       |  |             |
|   | Online Sales                  |  |                   | Marsha Laine  | <u></u>        |  |             |
|   | Date<br>10/10/2024            | Lamb, Benjamin   | f-state PAC (ID#: | )   |                | Amount of Contribution (\$)                        | \$25.00     |
|   | Principal occu<br>Research An | pation / Job title (See Instructions)  |                   | Employer (See Instructions Harvard University         | <u> </u><br>5) |  |             |
|   | Date<br>10/04/2024            | Lane, Neel   | f-state PAC (ID#: | )   |                | Amount of Contribution (\$)                        | \$100.00    |
|   | Principal occu<br>Attorney    | pation / Job title (See Instructions)  |                   | Employer (See Instructions<br>Norton Rose Fulbright L |                |  |             |
|   |                               |  | •                 |   |                |  |             |

|   | MONET                      | ARY POLITICAL CONTRIBUTION  | ONS  |         | SCHEDULE A1  |
|---|----------------------------|---|--|---------|--|
|   | The Instruc                | ction Guide explains how to complete this   | form.  | 1       | Total pages Schedule A1:<br>Sch: 49/95 Rpt: 52/157 |
| 2 | FILER NAME<br>Carranza, Kr | istian  |  | 3       | Filer ID (Ethics Commission Filers) 00087920       |
| 4 | Date<br>10/21/2024         | <ul> <li>Full name of contributor</li></ul>   |  | 7       | Amount of Contribution (\$) \$25.00                |
| 8 | Principal occur            | Chevy Chase, MD 20815 pation / Job title (See Instructions)   | 9 Employer (See Instructions                       | s)      |  |
|   | Not Employe                |   | Not Employed                                       | -,      |  |
|   | Date<br>10/18/2024         | Full name of contributor X out-of-state PAC (ID#: Latino Victory Fund Contributor address; City; State; Zip Code                                      | C00562777 )  |         | Amount of Contribution (\$) \$1,000.00             |
|   | Dringing Lagor             | Washington, DC 20043  | Franksian (Cook Instructions                       | Ţ       |  |
|   | Principal occu             | pation / Job title (See Instructions)   | Employer (See Instructions                         | s)      |  |
|   | Date<br>10/17/2024         | Full name of contributor  out-of-state PAC (ID#: Lau, Roger  Contributor address; City; State; Zip Code   |  |         | Amount of Contribution (\$) \$100.00               |
|   | Dringing Lagran            | Silver Spring, MD 20910   | Franksian (Cook Instructions                       | <u></u> |  |
|   | Staff                      | pation / Job title (See Instructions)   | Employer (See Instructions  Democratic National Co |         | nittee   |
|   | Date<br>10/17/2024         | Full name of contributor  out-of-state PAC (ID#: Law Offices of Fidel Rodriguez Jr  Contributor address; City; State; Zip Code  San Antonio, TX 78212 |  |         | Amount of Contribution (\$) \$500.00               |
|   | Principal occu             | pation / Job title (See Instructions)   | Employer (See Instructions                         | 5)      |  |
|   | Date<br>09/30/2024         | Full name of contributor out-of-state PAC (ID#: Leaders We Deserve  Contributor address; City; State; Zip Code  Washington, DC 20003                  |  |         | Amount of Contribution (\$)<br>\$275,000.00        |
|   | Principal occu             | pation / Job title (See Instructions)   | Employer (See Instructions                         | 5)      |  |
|   |                            |   | •  |         |  |

|   | MONET                         | ARY POLITICAL CONTRIBUTIONS  |     | SCHEDULE A1  |
|---|-------------------------------|--|-----|--|
|   | The Instru                    | ction Guide explains how to complete this form.  | 1   | Total pages Schedule A1:<br>Sch: 50/95 Rpt: 53/157 |
| 2 | FILER NAME<br>Carranza, Kı    | istian   | 3   | Filer ID (Ethics Commission Filers) 00087920       |
| 4 | Date<br>10/07/2024            | 5 Full name of contributor out-of-state PAC (ID#:) Leaders We Deserve  6 Contributor address; City; State; Zip Code                    | 7   | Amount of Contribution (\$) \$155,000.00           |
| 8 | Principal occu                | Washington, DC 20003 pation / Job title (See Instructions)  9 Employer (See Instructions)  | ne) |  |
| _ | Date                          | Full name of contributor Out-of-state PAC (ID#:)   | T   | Amount of Contribution (\$)                        |
|   | 10/10/2024                    | Leaders We Deserve  Contributor address; City; State; Zip Code   |     | \$300,000.00                                       |
|   | Delicalis al access           | Washington, DC 20003   |     |  |
|   | Principal occu                | pation / Job title (See Instructions) Employer (See Instruction  | ns) |  |
|   | Date<br>10/24/2024            | Full name of contributor out-of-state PAC (ID#:)  Leaders We Deserve  Contributor address; City; State; Zip Code                       |     | Amount of Contribution (\$) \$100,000.00           |
|   | Principal occu                | Washington, DC 20003 pation / Job title (See Instructions)  Employer (See Instructions)  | ns) |  |
|   |                               |  |     |  |
|   | Date<br>10/24/2024            | Full name of contributor out-of-state PAC (ID#:)  Leaders We Deserve  Contributor address; City; State; Zip Code  Washington, DC 20003 |     | Amount of Contribution (\$) \$375,000.00           |
|   | Principal occu                | pation / Job title (See Instructions)  Employer (See Instructions)   | ns) |  |
|   | Date<br>10/02/2024            | Full name of contributor out-of-state PAC (ID#:)  Lemmond, byron  Contributor address; City; State; Zip Code  Katy, TX 77449-7504      |     | Amount of Contribution (\$) \$7.00                 |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)  Employer (See Instructions)  Not Employed   | ns) |  |
|   |                               | l  |     |  |

|   | MONET                         | ARY POLITICAL CONTRIB   | UTION    | IS  |        | SCHEDUL  | E <b>A1</b> |
|---|-------------------------------|---|----------|---|--------|--|-------------|
|   | The Instruc                   | ction Guide explains how to complete  | this for | n.  | 1      | Total pages Schedule A1:<br>Sch: 51/95 Rpt: 54/157 |             |
| 2 | FILER NAME<br>Carranza, Kr    | istian  |          |   | 3      | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date<br>10/09/2024            | <ul> <li>Full name of contributor  out-of-state PAL Lenz, Janice</li> <li>Contributor address; City; State; Zip Code</li> </ul> |          |   | 7      | Amount of Contribution (\$)                        | \$100.00    |
| 8 | Principal occu                | San Antonio, TX 78258 pation / Job title (See Instructions)   | 9        | Employer (See Instructions                          | <br>s) |  |             |
|   | Not Employe                   | d   |          | Not Employed  |        |  |             |
|   | Date<br>10/11/2024            | Full name of contributor out-of-state PAL Leonard, Jane  Contributor address; City; State; Zip Code                             |          | )   | •      | Amount of Contribution (\$)                        | \$25.00     |
|   |                               | Saint Paul, MN 55108  |          |   |        |  |             |
|   |                               | pation / Job title (See Instructions)   |          | Employer (See Instructions                          | s)     |  |             |
|   | Not Employe                   |   |          | Not Employed  | _      |  |             |
|   | Date<br>10/22/2024            | Full name of contributor out-of-state PA Lewis, Wesley  Contributor address; City; State; Zip Code                              | AC (ID#: | )   |        | Amount of Contribution (\$)                        | \$25.00     |
|   |                               | Austin, TX 78748  |          |   |        |  |             |
|   | Principal occu<br>Realtor     | oation / Job title (See Instructions)   |          | Employer (See Instructions<br>Lewis Commercial Real | ′      | nc.  |             |
|   | Date<br>10/07/2024            | Full name of contributor out-of-state PAL Lindsey, Rosanne  Contributor address; City; State; Zip Code  Austin, TX 78746        |          | )   |        | Amount of Contribution (\$)                        | \$50.00     |
|   | Principal occu<br>Not Employe | oation / Job title (See Instructions)<br>d  |          | Employer (See Instructions<br>Not Employed          | 5)     |  |             |
|   | Date<br>10/06/2024            | Full name of contributor out-of-state PAL Lochart, James  Contributor address; City; State; Zip Code  New York, NY 10024        | AC (ID#: |   | •      | Amount of Contribution (\$)                        | \$1.25      |
|   | Principal occu<br>Editor      | pation / Job title (See Instructions)   |          | Employer (See Instructions Hearst Magazines         | 5)     |  |             |
|   |                               |   | '        |   |        |  |             |

|   | MONET                         | ARY POLITICAL CONT  | RIBUTION                | S  |   | SCHEDULE   | <b>■ A1</b> |
|---|-------------------------------|---|-------------------------|--|---|--|-------------|
|   | The Instru                    | ction Guide explains how to com   | plete this forr         | n.   | 1 | Total pages Schedule A1:<br>Sch: 52/95 Rpt: 55/157 |             |
| 2 | FILER NAME<br>Carranza, Kr    | istian  |                         |  | 3 | Filer ID (Ethics Commission 00087920               | ı Filers)   |
| 4 | Date<br>10/23/2024            | Loewy, Adam   | -state PAC (ID#:        | )  | 7 | Amount of Contribution (\$) \$3                    | 10,000.00   |
|   |                               | Austin, TX 78701  | ,                       |  |   |  |             |
| 8 | Principal occu<br>Law         | pation / Job title (See Instructions)   | 9                       | Employer (See Instructions<br>Loewy Law Firm | ) |  |             |
|   | Date<br>09/30/2024            | Full name of contributor out-of-<br>Lofton, Suzy  Contributor address; City; State; Zip C |                         |  |   | Amount of Contribution (\$)                        | \$25.00     |
|   | Principal occu                | Cedar Park, TX 78613 pation / Job title (See Instructions)                                |                         | Employer (See Instructions                   |   |  |             |
|   | Deputy Supe                   |   |                         | Lago Vista ISD                               | , |  |             |
|   | Date<br>10/08/2024            | Full name of contributor out-of-<br>Long, Meghan  Contributor address; City; State; Zip C | -state PAC (ID#:        |  |   | Amount of Contribution (\$)                        | \$4.16      |
|   |                               | Oakland, CA 94612   |                         |  |   |  |             |
|   | •                             | pation / Job title (See Instructions)<br>t Coordinator                                    |                         | Employer (See Instructions Vote Solar        | ) |  |             |
|   | Date<br>10/02/2024            | Love, Julia   | -state PAC (ID#:<br>ode |  |   | Amount of Contribution (\$)                        | \$5.00      |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)   |                         | Employer (See Instructions Not Employed      | ) |  |             |
|   | Date<br>10/10/2024            | Love, Julie   | -state PAC (ID#:        |  |   | Amount of Contribution (\$)                        | \$10.00     |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)   |                         | Employer (See Instructions Not Employed      | ) |  |             |
|   |                               |   | •                       |  |   |  |             |

|   | MONET                          | ARY POLITICAL (   | CONTRIBUTIO            | N  | S  |    | SCHEDULE   | <b>■ A1</b> |
|---|--------------------------------|---|------------------------|----|--|----|--|-------------|
|   | The Instru                     | ction Guide explains how  | to complete this fo    | rr | n.   | 1  | Total pages Schedule A1:<br>Sch: 53/95 Rpt: 56/157 |             |
| 2 | FILER NAME<br>Carranza, Kr     | ristian   |                        |    |  | 3  | Filer ID (Ethics Commission 00087920               | Filers)     |
| 4 | Date<br>10/24/2024             | <ul><li>5 Full name of contributor<br/>Lowder, Michael</li><li>6 Contributor address; City; S</li></ul> | out-of-state PAC (ID#: |    | )  | 7  | Amount of Contribution (\$)                        | \$22.73     |
|   |                                | Fort Worth, TX 76116  |                        |    |  |    |  |             |
| 8 | Principal occu<br>Not Employe  | pation / Job title (See Instructions<br>ed  | s) <u> </u>            |    | Employer (See Instructions Not Employed            | 5) |  |             |
|   | Date<br>10/09/2024             | Full name of contributor MCDONALD, Susan  Contributor address; City; S                                  | out-of-state PAC (ID#: |    | )  |    | Amount of Contribution (\$)                        | \$9.09      |
|   | Discipal                       | Washington, DC 20008  |                        |    | Frankrije (Ostalia drugića os                      |    |  |             |
|   | Attorney                       | pation / Job title (See Instructions  | 5)                     |    | Employer (See Instructions US Securities & Exhcha  |    | Commission   |             |
|   | Date 09/30/2024                | Full name of contributor Madden, Jeanne Contributor address; City; S                                    | out-of-state PAC (ID#: |    | )  |    | Amount of Contribution (\$)                        | \$1.50      |
|   |                                | Newton, MA 02461  |                        |    |  |    |  |             |
|   | Principal occu<br>Associate Pr | pation / Job title (See Instructions<br>ofessor   | s)<br>                 |    | Employer (See Instructions Northeastern University | •  |  |             |
|   | Date<br>10/03/2024             | Full name of contributor Maller, Abigail Contributor address; City; S Los Angeles, CA 90043             | out-of-state PAC (ID#: |    | )  |    | Amount of Contribution (\$)                        | \$1.00      |
|   | Principal occu<br>Physician    | pation / Job title (See Instructions  | 5)                     |    | Employer (See Instructions UCLA Health             | 5) |  |             |
|   | Date<br>10/14/2024             | Full name of contributor  Manatt, Linda  Contributor address; City; Si  Ames, IA 50010-4191             | out-of-state PAC (ID#: |    | )  |    | Amount of Contribution (\$)                        | \$25.00     |
|   | Principal occu<br>Not Employe  | pation / Job title (See Instructionsed  | s)                     |    | Employer (See Instructions Not Employed            | 5) |  |             |
|   |                                |   |                        |    |  |    |  |             |

|   | MONET                          | ARY POLITICAL (   | CONTRIBUTIO                              | N        | S   |                | SCHEDUL  | E <b>A1</b> |
|---|--------------------------------|---|--|----------|---|----------------|--|-------------|
|   | The Instru                     | ction Guide explains hov  | ı to complete this fo                    | rn       | n.  | 1              | Total pages Schedule A1:<br>Sch: 54/95 Rpt: 57/157 |             |
| 2 | FILER NAME<br>Carranza, Kr     | istian  |  |          |   | 3              | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date<br>10/10/2024             | <ul><li>5 Full name of contributor<br/>Marck, Eugene</li><li>6 Contributor address; City; S</li></ul> | out-of-state PAC (ID#:                   |          |   | 7              | Amount of Contribution (\$)                        | \$50.00     |
| 8 | Principal occu                 | San Antonio, TX 78209<br>pation / Job title (See Instructions   | s) [                                     | <u> </u> | Employer (See Instructions                    | ;)<br>         |  |             |
| Ü | Not Employe                    |   | "  | •        | Not Employed                                  | "              |  |             |
|   | Date<br>10/20/2024             | Full name of contributor  Marek, Moira  Contributor address; City; S                                  |  |          | )   | •              | Amount of Contribution (\$)                        | \$50.00     |
|   | Principal occu                 | Raleigh, NC 27609 pation / Job title (See Instructions  | 5)                                       |          | Employer (See Instructions                    | <u> </u><br>s) |  |             |
|   | Account Mar                    | nager   |  |          | Warchest                                      |                |  |             |
|   | Date<br>10/04/2024             | Full name of contributor  Martinez, Dennis  Contributor address; City; S                              | out-of-state PAC (ID#:<br>tate; Zip Code |          | )   |                | Amount of Contribution (\$)                        | \$25.00     |
|   |                                | San Antonio, TX 78212   |  |          |   |                |  |             |
|   | Principal occu<br>Tax Consulta | pation / Job title (See Instructions<br>ant   | 5)                                       |          | Employer (See Instructions DMAssociates       | s)             |  |             |
|   | Date<br>10/09/2024             | Full name of contributor Martinez, Dennis Contributor address; City; S San Antonio, TX 78212          |  |          | )   |                | Amount of Contribution (\$)                        | \$100.00    |
|   | Principal occu<br>Tax Consulta | pation / Job title (See Instructions<br>ant   | s)                                       |          | Employer (See Instructions<br>Dennis Martinez | 5)             |  |             |
|   | Date<br>10/24/2024             | Full name of contributor Martinez, Kristen Contributor address; City; S San Antonio, TX 78249         | out-of-state PAC (ID#:                   |          | )   | •              | Amount of Contribution (\$)                        | \$1.00      |
|   | •                              | pation / Job title (See Instructions  | 5)                                       |          | Employer (See Instructions                    |                | nto.   |             |
|   | Occupationa                    | і тпетаріѕі   | <u> </u>                                 |          | Pediatric Therapy Spec                        | ıalı           | <b>ม</b> เร  |             |

|   | MONET                         | ARY POLITICAL C   | ONTRIBUTIO                               | Ν   | S  |         | SCHEDUL  | E <b>A1</b> |
|---|-------------------------------|---|--|-----|--|---------|--|-------------|
|   | The Instruc                   | ction Guide explains how  | to complete this fo                      | orr | n.   | 1       | Total pages Schedule A1:<br>Sch: 55/95 Rpt: 58/157 |             |
| 2 | FILER NAME<br>Carranza, Kr    | ristian   |  |     |  | 3       | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date<br>10/10/2024            | <ul><li>5 Full name of contributor<br/>Martinez, Priscila</li><li>6 Contributor address; City; St</li></ul> | out-of-state PAC (ID#:                   |     | )  | 7       | Amount of Contribution (\$)                        | \$25.00     |
| 8 | Dringing aggr                 | San Francisco, CA 94117   | , I                                      | _   | Employer (Coo Instructions                             | <u></u> |  |             |
| 0 | Principal occu<br>Program Ma  | pation / Job title (See Instructions<br>nager   | )  | 9   | Employer (See Instructions<br>Chan Zuckerberg Initiati |         |  |             |
|   | Date<br>10/16/2024            | Full name of contributor  Mary Ann Perez Campaig  Contributor address; City; St                             |  |     | )  |         | Amount of Contribution (\$)                        | \$250.00    |
|   | Principal occu                | Houston, TX 77017 pation / Job title (See Instructions  | )  |     | Employer (See Instructions                             | <br>s)  |  |             |
|   |                               |   |  |     |  |         |  |             |
|   | Date<br>10/11/2024            | Full name of contributor  McGarity, Cathleen  Contributor address; City; St                                 | out-of-state PAC (ID#:<br>ate; Zip Code  |     | )  |         | Amount of Contribution (\$)                        | \$50.00     |
|   | Dringinal accu                | Austin, TX 78731 pation / Job title (See Instructions   | , I                                      |     | Employer (See Instructions                             | ·/      |  |             |
|   | Retired                       | pation / 300 title (See matractions   | ,  |     | Not Employed   | •)      |  |             |
|   | Date<br>10/04/2024            | Full name of contributor McKnight, Barbara Contributor address; City; St Austin, TX 78704                   | out-of-state PAC (ID#:_<br>ate; Zip Code |     | )  |         | Amount of Contribution (\$)                        | \$5.00      |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions<br>ed  | )  |     | Employer (See Instructions<br>Not Employed             | 5)      |  |             |
|   | Date<br>10/13/2024            | Full name of contributor McLeod, Hazel Contributor address; City; St Falls Church, VA 22043                 | out-of-state PAC (ID#:_                  |     | )  |         | Amount of Contribution (\$)                        | \$2.50      |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions<br>ed  | )  |     | Employer (See Instructions None                        | s)      |  |             |
|   |                               |   |  |     |  |         |  |             |

|   | MONET                          | ARY POLITICAL C  | ONTRIBUTION                             | S                                    |      | SCHEDUL  | E <b>A1</b> |
|---|--------------------------------|--|---|--------------------------------------|------|--|-------------|
|   | The Instru                     | ction Guide explains how   | to complete this for                    | m.                                   | 1    | Total pages Schedule A1:<br>Sch: 56/95 Rpt: 59/157 |             |
| 2 | FILER NAME<br>Carranza, Kr     | istian   |   |                                      | 3    | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date<br>10/25/2024             | <ul><li>5 Full name of contributor [McMillan, William</li><li>6 Contributor address; City; Sta</li></ul> | out-of-state PAC (ID#:<br>tte; Zip Code |                                      | 7    | Amount of Contribution (\$)                        | \$2.00      |
| 8 | Principal occu                 | Arlington, MA 02474 pation / Job title (See Instructions)  | 9                                       | Employer (See Instructions           | <br> |  |             |
|   | Musician                       |  |   | Will McMillan                        |      |  |             |
|   | Date<br>10/26/2024             | Full name of contributor  McNab, Alicia  Contributor address; City; Sta                                  |   | )                                    |      | Amount of Contribution (\$)                        | \$25.00     |
|   |                                | San Antonio, TX 78212  |   |                                      |      |  |             |
|   | Principal occu<br>Lawyer       | pation / Job title (See Instructions)  |   | Employer (See Instructions USAO      | 5)   |  |             |
|   | Date<br>10/16/2024             | Full name of contributor [<br>Mcnearney, Molly<br>Contributor address; City; Sta                         | out-of-state PAC (ID#:<br>tte; Zip Code |                                      |      | Amount of Contribution (\$)                        | \$100.00    |
|   |                                | van nuys, CA 91406   |   |                                      |      |  |             |
|   | Principal occu<br>Writer       | pation / Job title (See Instructions)  |   | Employer (See Instructions ABC       | s)   |  |             |
|   | Date<br>10/10/2024             | Full name of contributor  Meed, Alex  Contributor address; City; Sta  Austin, TX 78703                   | out-of-state PAC (ID#:<br>tte; Zip Code | )                                    |      | Amount of Contribution (\$)                        | \$100.00    |
|   | Principal occu<br>Cybersecurit | pation / Job title (See Instructions)<br>y Analyst   |   | Employer (See Instructions Atlassian | 5)   |  |             |
|   | Date<br>09/28/2024             | Full name of contributor Melanson, Christianne Contributor address; City; Sta Bellaire, TX 77401-2503    | out-of-state PAC (ID#:<br>tte; Zip Code | )                                    |      | Amount of Contribution (\$)                        | \$15.00     |
|   | Principal occu<br>Accountant   | pation / Job title (See Instructions)  |   | Employer (See Instructions Retired   | s)   |  |             |
|   |                                |  | ,                                       |                                      |      |  |             |

|   | MONET                         | ARY POLITICAL CONTRIBUT   |         | SCHEDULI  | E <b>A1</b> |  |           |
|---|-------------------------------|---|---------|---|-------------|--|-----------|
|   | The Instruc                   | ction Guide explains how to complete th   | nis for | m.  | 1           | Total pages Schedule A1:<br>Sch: 57/95 Rpt: 60/157 |           |
| 2 | FILER NAME<br>Carranza, Kr    | istian  |         |   | 3           | Filer ID (Ethics Commission 00087920               | n Filers) |
| 4 | Date 10/05/2024               | <ul> <li>Full name of contributor</li></ul>   |         |   | 7           | Amount of Contribution (\$)                        | \$20.00   |
|   |                               | Austin, TX 78702  |         |   |             |  |           |
| 8 | Principal occu<br>Historian   | pation / Job title (See Instructions)   | 9       | Employer (See Instructions Texas State University | 5)          |  |           |
|   | Date<br>10/09/2024            | Full name of contributor  |         |   |             | Amount of Contribution (\$)                        | \$10.00   |
|   | Principal occu                | Austin, TX 78702 pation / Job title (See Instructions)  |         | Employer (See Instructions                        | ;)          |  |           |
|   | Historian                     | pation / 305 title (See instructions)   |         | Texas State University                            | "           |  |           |
|   | Date<br>10/08/2024            | Full name of contributor  | (ID#:   | )   | •           | Amount of Contribution (\$)                        | \$10.00   |
|   |                               | San Antonio, TX 78251   |         |   |             |  |           |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)<br>ed   |         | Employer (See Instructions Not Employed           | s)          |  |           |
|   | Date<br>10/08/2024            | Full name of contributor  |         |   |             | Amount of Contribution (\$)                        | \$1.00    |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)   |         | Employer (See Instructions Not Employed           | 5)          |  |           |
|   | Date<br>10/09/2024            | Full name of contributor out-of-state PAC ( Miller, Asher  Contributor address; City; State; Zip Code  Evanston, IL 60201 |         |   | •           | Amount of Contribution (\$)                        | \$25.00   |
|   | Principal occu<br>Educator    | pation / Job title (See Instructions)   |         | Employer (See Instructions CASEL                  | s)          |  |           |
|   |                               |   |         |   |             |  |           |

|   | MONET                          | ARY POLITICAL C  | ONTRIBUTION                            | NS   |     | SCHEDU   | LE <b>A1</b> |
|---|--------------------------------|--|--|--|-----|--|--------------|
|   | The Instruc                    | ction Guide explains how   | to complete this for                   | m.   | 1   | Total pages Schedule A1:<br>Sch: 58/95 Rpt: 61/157 |              |
| 2 | FILER NAME<br>Carranza, Kr     | ristian  |  |  | 3   | Filer ID (Ethics Commission 00087920               | on Filers)   |
| 4 | Date 09/30/2024                | <ul><li>5 Full name of contributor [Miller, Connie</li><li>6 Contributor address; City; Sta</li></ul>  | out-of-state PAC (ID#:<br>te; Zip Code |  | 7   | Amount of Contribution (\$)                        | \$100.00     |
| 8 | Principal occu<br>Homemaker    | Lubbock, TX 79424 pation / Job title (See Instructions)  | 9                                      | Employer (See Instructio                   | ns) |  |              |
|   | Date<br>10/18/2024             | Full name of contributor  Miller, Montgomery  Contributor address; City; Sta  Huntington Beach, CA 926 | te; Zip Code                           | )  |     | Amount of Contribution (\$)                        | \$1,000.00   |
|   | Principal occu<br>Data Analyst | pation / Job title (See Instructions)  |  | Employer (See Instruction R1 RCM           | ns) |  |              |
|   | Date<br>09/30/2024             | Full name of contributor  Monsanto, Natalie  Contributor address; City; Sta                            | out-of-state PAC (ID#:<br>te; Zip Code |  |     | Amount of Contribution (\$)                        | \$50.00      |
|   |                                | Los Angeles, CA 90041 pation / Job title (See Instructions) tions Director                             |  | Employer (See Instructio                   | ns) |  |              |
|   | Date<br>10/16/2024             | Full name of contributor  Montelongo, Natalie  Contributor address; City; Sta  Washington, DC 20009    |  |  |     | Amount of Contribution (\$)                        | \$200.00     |
|   | Principal occu<br>Political    | pation / Job title (See Instructions)  |  | Employer (See Instruction Pivotal Ventures | ns) |  |              |
|   | Date<br>10/12/2024             | Full name of contributor  Montrose, Marc  Contributor address; City; Sta  Austin, TX 78702             | out-of-state PAC (ID#:                 |  |     | Amount of Contribution (\$)                        | \$25.00      |
|   | Principal occu<br>Data Analyst | pation / Job title (See Instructions)  |  | Employer (See Instruction GenPrex          | ns) |  |              |
|   |                                |  |  |  |     |  |              |

|   | MONET                         | ARY POLITICAL C   | ONTRIBUTIO                          | Ν   | S  |         | SCHEDUL  | E <b>A1</b> |
|---|-------------------------------|---|-------------------------------------|-----|--|---------|--|-------------|
|   | The Instru                    | ction Guide explains how  | to complete this fo                 | orr | n.   | 1       | Total pages Schedule A1:<br>Sch: 59/95 Rpt: 62/157 |             |
| 2 | FILER NAME<br>Carranza, Kı    | ristian   |                                     |     |  | 3       | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date<br>10/16/2024            | <ul><li>5 Full name of contributor<br/>Moran, Paris</li><li>6 Contributor address; City; St</li></ul> | out-of-state PAC (ID#:              |     | )  | 7       | Amount of Contribution (\$)                        | \$50.00     |
| 0 | Dringing oggu                 | San Antonio, TX 78253   | , I                                 | _   | Employer (See Instructions                           | <u></u> |  |             |
| 0 | Creative Pro                  | pation / Job title (See Instructions<br>ducer   | )                                   | 9   | Employer (See Instructions EPA                       | s)      |  |             |
|   | Date<br>10/03/2024            | Full name of contributor<br>Morrison, Marisa<br>Contributor address; City; St                         |                                     |     | )  | •       | Amount of Contribution (\$)                        | \$1.00      |
|   | Principal occu                | Chestnut Hill, MA 02467 pation / Job title (See Instructions  | <u> </u>                            |     | Employer (See Instructions                           | ;)<br>  |  |             |
|   | Researcher                    | pation / Job title (See Instructions  | ,                                   |     | RTI InternationL                                     | "       |  |             |
|   | Date<br>10/09/2024            | Full name of contributor  Mundstock, Ron  Contributor address; City; St                               | out-of-state PAC (ID#:ate; Zip Code |     | )  |         | Amount of Contribution (\$)                        | \$50.00     |
|   |                               | San Antonio, TX 78215-19  | 920                                 |     |  |         |  |             |
|   | Principal occu<br>Program Ana | pation / Job title (See Instructions<br>alyst   | )                                   |     | Employer (See Instructions DoD                       | s)      |  |             |
|   | Date<br>09/27/2024            | Full name of contributor Murphy, Michael Contributor address; City; St Kensington, MD 20895           |                                     |     | )  |         | Amount of Contribution (\$)                        | \$200.00    |
|   | Principal occu<br>Manager     | pation / Job title (See Instructions  | )                                   |     | Employer (See Instructions<br>Lake Research Partners | •       |  |             |
|   | Date<br>09/29/2024            | Full name of contributor  Musselman, KT  Contributor address; City; St  Austin, TX 78717              | out-of-state PAC (ID#:_             |     | )  | •       | Amount of Contribution (\$)                        | \$25.00     |
|   | Principal occu                | pation / Job title (See Instructions  | )                                   |     | Employer (See Instructions Williamson County         | 5)      |  |             |
|   | Subtract Of the               |   |                                     |     | anson county   |         |  |             |

|   | MONET                            | ARY POLITICAL CONTRIBU  | JTION    | IS   |                   | SCHEDUL  | E <b>A1</b> |
|---|----------------------------------|---|----------|--|-------------------|--|-------------|
|   | The Instruc                      | ction Guide explains how to complete t  | this for | m.   | 1                 | Total pages Schedule A1:<br>Sch: 60/95 Rpt: 63/157 |             |
| 2 | FILER NAME<br>Carranza, Kr       | ristian   |          |  | 3                 | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date 10/03/2024                  | <ul> <li>Full name of contributor</li></ul>   |          | )  | 7                 | Amount of Contribution (\$)                        | \$10.00     |
| _ |                                  | Austin, TX 78717  |          |  | _                 |  |             |
| 8 | Principal occu<br>Justice of the | pation / Job title (See Instructions)<br>e Peace  | 9        | Employer (See Instructions Williamson County | 5)                |  |             |
|   | Date<br>10/16/2024               | Full name of contributor out-of-state PAG Musselman, KT Contributor address; City; State; Zip Code  Austin, TX 78717            |          |  | •                 | Amount of Contribution (\$)                        | \$2.01      |
|   | Principal occu                   | pation / Job title (See Instructions)   |          | Employer (See Instructions                   | <u> </u><br>  (3) |  |             |
|   | Justice of the                   | e Peace   |          | Williamson County                            |                   |  |             |
|   | Date<br>09/30/2024               | Full name of contributor out-of-state PAC Nations, Howard  Contributor address; City; State; Zip Code                           | C (ID#:  | )  |                   | Amount of Contribution (\$)                        | \$500.00    |
|   |                                  | Houston, TX 77042   |          |  |                   |  |             |
|   | Principal occu<br>Attorney       | pation / Job title (See Instructions)   |          | Employer (See Instructions Self              | s)                |  |             |
|   | Date<br>10/23/2024               | Full name of contributor out-of-state PAG Nava, Alex Contributor address; City; State; Zip Code Shavano Park, TX 78230          |          |  | -                 | Amount of Contribution (\$)                        | \$250.00    |
|   | Principal occu<br>Attorney       | pation / Job title (See Instructions)   |          | Employer (See Instructions ANG PLLC          | 5)                |  |             |
|   | Date<br>10/10/2024               | Full name of contributor out-of-state PAC Neverdowski, Stephanie Contributor address; City; State; Zip Code Katy, TX 77450-7552 | C (ID#:  |  |                   | Amount of Contribution (\$)                        | \$2.27      |
|   | Principal occu<br>Not Employe    | pation / Job title (See Instructions)   |          | Employer (See Instructions Not Employed      | s)                |  |             |
|   |                                  |   |          |  |                   |  |             |

|   | MONET                         | ARY POLITICAL CONTR  | RIBUTION              | S   |                | SCHEDUL  | E <b>A1</b> |
|---|-------------------------------|--|-----------------------|---|----------------|--|-------------|
|   | The Instruc                   | ction Guide explains how to comp   | plete this forr       | n.  | 1              | Total pages Schedule A1:<br>Sch: 61/95 Rpt: 64/157 |             |
| 2 | FILER NAME<br>Carranza, Kr    | istian   |                       |   | 3              | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date<br>10/25/2024            | Nicholls, Rosalie  6 Contributor address; City; State; Zip Co  |                       |   | 7              | Amount of Contribution (\$)                        | \$10.00     |
| 8 | Principal occu                | Austin, TX 78748 pation / Job title (See Instructions)   | 9                     | Employer (See Instructions                          | <u> </u><br>s) |  |             |
|   | Not Employe                   |  |                       | Not Employed  | ,              |  |             |
|   | Date<br>10/22/2024            | Full name of contributor out-of-s Nicholson, Arthur  Contributor address; City; State; Zip Co                    |                       | )   | •              | Amount of Contribution (\$)                        | \$176.00    |
|   | Principal occu                | pation / Job title (See Instructions)  |                       | Employer (See Instructions                          | <u> </u>       |  |             |
|   | Not Employe                   | d  |                       | Not Employed  |                |  |             |
|   | Date<br>10/21/2024            | Full name of contributor out-of-s Nilsen, Benjamin Contributor address; City; State; Zip Co                      | itate PAC (ID#:<br>de |   |                | Amount of Contribution (\$)                        | \$1.00      |
|   |                               | Vallejo, CA 94589  |                       |   |                |  |             |
|   | Principal occu<br>Process Tec | pation / Job title (See Instructions)<br>hnician II  |                       | Employer (See Instructions Thermo Fisher Scientific |                |  |             |
|   | Date<br>10/25/2024            | Nole, Amelia   |                       |   |                | Amount of Contribution (\$)                        | \$1.00      |
|   | Principal occu<br>Physical    | pation / Job title (See Instructions)  |                       | Employer (See Instructions<br>Physical Therapy      | 5)             |  |             |
|   | Date<br>10/10/2024            | Full name of contributor out-of-s Norris, Robert  Contributor address; City; State; Zip Co  San Marcos, TX 78666 | tate PAC (ID#:        | )   | -              | Amount of Contribution (\$)                        | \$10.00     |
|   |                               | pation / Job title (See Instructions)  |                       | Employer (See Instructions                          |                |  |             |
|   | Planner                       |  |                       | Texas General Land Of                               | fice           |  |             |
|   |                               |  |                       |   |                |  |             |

|   | MONET                         | ARY POLITICAL CONTRIBU   | JTION    | IS   |                | SCHEDUL  | E <b>A1</b> |
|---|-------------------------------|--|----------|--|----------------|--|-------------|
|   | The Instruc                   | ction Guide explains how to complete t   | this for | m.   | 1              | Total pages Schedule A1:<br>Sch: 62/95 Rpt: 65/157 |             |
| 2 | FILER NAME<br>Carranza, Kr    | istian   |          |  | 3              | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date 09/30/2024               | <ul> <li>Full name of contributor  out-of-state PAC Obenauf, Margaret</li> <li>Contributor address; City; State; Zip Code</li> </ul> |          |  | 7              | Amount of Contribution (\$)                        | \$100.00    |
| 8 | Principal occu                | Albuquerque, NM 87109 pation / Job title (See Instructions)  | 9        | Employer (See Instructions                 | <u> </u><br>s) |  |             |
|   | Not Employe                   |  |          | Not Employed                               | ,              |  |             |
|   | Date<br>10/05/2024            | Full name of contributor out-of-state PAC Odarling, Cait O'Darling  Contributor address; City; State; Zip Code                       | C (ID#:  | )  |                | Amount of Contribution (\$)                        | \$1.25      |
|   |                               | Tulsa, OK 74114  |          | 5 1 (0 1 1 1                               | <u>L</u>       |  |             |
|   | LPI                           | pation / Job title (See Instructions)  |          | Employer (See Instructions Self Employed   | 5)             |  |             |
|   | Date<br>10/02/2024            | Full name of contributor out-of-state PAC Oglethorpe, Janet  Contributor address; City; State; Zip Code                              | C (ID#:  | )  |                | Amount of Contribution (\$)                        | \$50.00     |
|   |                               | San Antonio, TX 78230  |          |  | Ĺ              |  |             |
|   | Not Employe                   | pation / Job title (See Instructions)<br>d   |          | Employer (See Instructions Not Employed    | 5)             |  |             |
|   | Date<br>10/05/2024            | Full name of contributor out-of-state PAC Ohrt, Frank Contributor address; City; State; Zip Code Houston, TX 77018                   |          |  |                | Amount of Contribution (\$)                        | \$250.00    |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)<br>d   |          | Employer (See Instructions<br>Not Employed | 5)             |  |             |
|   | Date<br>10/03/2024            | Full name of contributor out-of-state PAC Olivares, Michael Contributor address; City; State; Zip Code Helotes, TX 78023             | C (ID#:  |  |                | Amount of Contribution (\$)                        | \$25.00     |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)<br>d   |          | Employer (See Instructions Not Employed    | 5)             |  |             |
|   |                               |  | •        |  |                |  |             |

|   | MONET                         | ARY POLITICAL CO  | ONTRIBUTION                         | S  |    | SCHEDUL  | E <b>A1</b> |
|---|-------------------------------|---|-------------------------------------|--|----|--|-------------|
|   | The Instruc                   | ction Guide explains how to   | complete this forn                  | n.   | 1  | Total pages Schedule A1:<br>Sch: 63/95 Rpt: 66/157 |             |
| 2 | FILER NAME<br>Carranza, Kr    | istian  |                                     |  | 3  | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date<br>10/04/2024            | <ul><li>5 Full name of contributor</li><li>Olsson, Karen</li><li>6 Contributor address; City; State</li></ul> | out-of-state PAC (ID#:; Zip Code    |  | 7  | Amount of Contribution (\$)                        | \$100.00    |
| _ | Deignigal                     | Austin, TX 78722  | lo-                                 | Francisco (Con Instructions                |    |  |             |
| 8 | Writer                        | pation / Job title (See Instructions)   |                                     | Employer (See Instructions<br>Karen Olsson | )  |  |             |
|   | Date<br>10/13/2024            | Oswald, Peter  Contributor address; City; State   | out-of-state PAC (ID#:; Zip Code    | )  |    | Amount of Contribution (\$)                        | \$2.50      |
|   | Principal occu                | Wescosville, PA 18106 pation / Job title (See Instructions)   |                                     | Employer (See Instructions                 | 5) |  |             |
|   | Not Employe                   | d   |                                     | None                                       |    |  |             |
|   | Date<br>09/29/2024            | Full name of contributor  Ouellette, Chelsie  Contributor address; City; State                                | out-of-state PAC (ID#:;<br>Zip Code |  |    | Amount of Contribution (\$)                        | \$50.00     |
|   |                               | Amesbury, MA 01913  |                                     |  |    |  |             |
|   | Principal occu<br>Student     | pation / Job title (See Instructions)   |                                     | Employer (See Instructions N/A             | 5) |  |             |
|   | Date<br>10/09/2024            | Full name of contributor Pacheco, Yvonne Contributor address; City; State San Antonio, TX 78221               | out-of-state PAC (ID#:; Zip Code    | )  |    | Amount of Contribution (\$)                        | \$100.00    |
|   | Principal occu<br>CNA         | pation / Job title (See Instructions)   |                                     | Employer (See Instructions Unios           | )  |  |             |
|   | Date<br>10/05/2024            | Full name of contributor Padula, Carolyn Contributor address; City; State Gorham, ME 04038                    | out-of-state PAC (ID#:; Zip Code    | )  |    | Amount of Contribution (\$)                        | \$50.00     |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)   |                                     | Employer (See Instructions Not Employed    | 5) |  |             |
|   |                               |   | •                                   |  |    |  |             |

|   | MONET                          | ARY POLITICAL CONTRIBI   | UTION    | S  |                | SCHEDUL  | E <b>A1</b> |
|---|--------------------------------|--|----------|--|----------------|--|-------------|
|   | The Instruc                    | ction Guide explains how to complete   | this for | n.   | 1              | Total pages Schedule A1:<br>Sch: 64/95 Rpt: 67/157 |             |
| 2 | FILER NAME<br>Carranza, Kr     | istian   |          |  | 3              | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date<br>10/09/2024             | <ul> <li>Full name of contributor  out-of-state PA Parrish, Anne Thatcher</li> <li>Contributor address; City; State; Zip Code</li> </ul> |          |  | 7              | Amount of Contribution (\$)                        | \$100.00    |
| 8 | Principal occu                 | San Antonio, TX 78209 pation / Job title (See Instructions)  | 9        | Employer (See Instructions                 | <u> </u><br>s) |  |             |
|   | Not Employe                    |  |          | Not Employed                               | ,              |  |             |
|   | Date<br>10/06/2024             | Full name of contributor out-of-state PA Patey, Gretchen  Contributor address; City; State; Zip Code                                     |          |  | •              | Amount of Contribution (\$)                        | \$5.00      |
|   |                                | Madison, WI 53701  |          |  |                |  |             |
|   | Principal occu<br>Waitstaff    | pation / Job title (See Instructions)  |          | Employer (See Instructions Monona Catering | s)             |  |             |
|   | Date 09/30/2024                | Full name of contributor out-of-state PA Payne, Benton Contributor address; City; State; Zip Code  | AC (ID#: |  |                | Amount of Contribution (\$)                        | \$4.54      |
|   |                                | Dallas, TX 75206   |          |  |                |  |             |
|   | Principal occu<br>Consultant   | pation / Job title (See Instructions)  |          | Employer (See Instructions MBP Advisors    | 5)             |  |             |
|   | Date<br>10/14/2024             | Full name of contributor out-of-state PA Payne, Benton  Contributor address; City; State; Zip Code  Dallas, TX 75206                     | ,        | )  | •              | Amount of Contribution (\$)                        | \$9.09      |
|   | Principal occu<br>Consultant   | pation / Job title (See Instructions)  |          | Employer (See Instructions MBP Advisors    | <u>I</u><br>S) |  |             |
|   | Date<br>10/22/2024             | Full name of contributor out-of-state PA Perez-King, Vanessa Contributor address; City; State; Zip Code San Antonio, TX 78249            |          | )  |                | Amount of Contribution (\$)                        | \$2.63      |
|   | Principal occu<br>Senior Produ | pation / Job title (See Instructions) uct Owner  |          | Employer (See Instructions USAA            | <u>.</u><br>S) |  |             |
|   |                                |  | 1        |  |                |  |             |

|   | MONET                         | ARY POLITICAL CON   | NTRIBUTION                           | S  |        | SCHEDUL  | E <b>A1</b> |
|---|-------------------------------|---|--------------------------------------|--|--------|--|-------------|
|   | The Instruc                   | ction Guide explains how to c   | complete this forr                   | n.   | 1      | Total pages Schedule A1:<br>Sch: 65/95 Rpt: 68/157 |             |
| 2 | FILER NAME<br>Carranza, Kr    | istian  |                                      |  | 3      | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date<br>10/19/2024            | <ul><li>5 Full name of contributor  o o Perrenod, William</li><li>6 Contributor address; City; State; Z</li></ul> |                                      | )  | 7      | Amount of Contribution (\$)                        | \$25.00     |
| _ | District                      | New Orleans, LA 70117   | la la                                | Fundament (October National)                   |        |  |             |
| 8 |                               | pation / Job title (See Instructions)<br>siness Consultant  | 9                                    | Employer (See Instructions Self                | 5)     |  |             |
|   | Date<br>10/01/2024            | Phenix, Linda  Contributor address; City; State; Z  |                                      |  |        | Amount of Contribution (\$)                        | \$25.00     |
|   | Principal occu                | Houston, TX 77042 pation / Job title (See Instructions)   |                                      | Employer (See Instructions                     | <br>;) |  |             |
|   | Grant Writer                  |   |                                      | Self-employed                                  |        |  |             |
|   | Date<br>10/05/2024            | Full name of contributor  | ut-of-state PAC (ID#:<br><br>ip Code |  |        | Amount of Contribution (\$)                        | \$1.00      |
|   |                               | Colorado Springs, CO 80920  |                                      |  |        |  |             |
|   | Principal occu<br>Massage the | pation / Job title (See Instructions)<br>rapy   |                                      | Employer (See Instructions Salon 21            | s)     |  |             |
|   | Date<br>10/14/2024            | Full name of contributor o o Plaza III, Sergio Contributor address; City; State; Z                                | ut-of-state PAC (ID#:                |  |        | Amount of Contribution (\$)                        | \$100.00    |
|   | Principal occu<br>Planning Ma | pation / Job title (See Instructions)<br>nager  |                                      | Employer (See Instructions Travis County       | s)     |  |             |
|   | Date<br>10/10/2024            | Full name of contributor o o Pliszka, Steven  Contributor address; City; State; Z  San Antonio, TX 78232          | ut-of-state PAC (ID#:                |  |        | Amount of Contribution (\$)                        | \$500.00    |
|   | Principal occu<br>Professor   | pation / Job title (See Instructions)   |                                      | Employer (See Instructions University of Texas | s)     |  |             |
|   |                               |   | L                                    |  |        |  |             |

|   | MONET                         | ARY POLITICAL CONTRIBUTION  | N   | IS                                       |                | SCHEDULE   | <b>A1</b> |
|---|-------------------------------|---|-----|--|----------------|--|-----------|
|   | The Instruc                   | ction Guide explains how to complete this f   | orı | m.                                       | 1              | Total pages Schedule A1:<br>Sch: 66/95 Rpt: 69/157 |           |
| 2 | FILER NAME<br>Carranza, Kr    | istian  |     |  | 3              | Filer ID (Ethics Commission 00087920               | Filers)   |
| 4 | Date<br>10/19/2024            | <ul> <li>Full name of contributor</li></ul>   |     |  | 7              | Amount of Contribution (\$)                        | \$25.00   |
| _ |                               | San Antonio, TX 78230   | _   |  | L              |  |           |
| 8 | Principal occu<br>Educator    | pation / Job title (See Instructions)   | 9   | Employer (See Instructions Public School | 5)             |  |           |
|   | Date<br>10/04/2024            | Contributor address; City; State; Zip Code  |     | )  |                | Amount of Contribution (\$)                        | \$2.00    |
|   | Principal occu                | San Leon, TX 77539 pation / Job title (See Instructions)  |     | Employer (See Instructions               | <u> </u><br>5) |  |           |
|   | Not employe                   | d   |     | Not Employed                             |                |  |           |
|   | Date<br>10/06/2024            | Full name of contributor out-of-state PAC (ID#:_ Powell, Greig  Contributor address; City; State; Zip Code                    |     | )  |                | Amount of Contribution (\$)                        | \$3.00    |
|   |                               | San Leon, TX 77539  |     |  |                |  |           |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)   |     | Employer (See Instructions Not Employed  | 5)             |  |           |
|   | Date<br>10/07/2024            | Full name of contributor out-of-state PAC (ID#:_Powell, Greig  Contributor address; City; State; Zip Code  San Leon, TX 77539 |     | )  |                | Amount of Contribution (\$)                        | \$3.00    |
|   | Principal occu<br>Not employe | pation / Job title (See Instructions)   |     | Employer (See Instructions Not employed  | <u> </u><br>5) |  |           |
|   | Date<br>10/09/2024            | Full name of contributor out-of-state PAC (ID#:_ Powell, Greig Contributor address; City; State; Zip Code San Leon, TX 77539  |     |  |                | Amount of Contribution (\$)                        | \$4.00    |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)   |     | Employer (See Instructions Not Employed  | s)             |  |           |
|   |                               |   |     |  |                |  |           |

|   | MONET                           | ARY POLITICAL CONTRIBUT   | IONS                                       | SCHEDULE A   | <b>A1</b> |
|---|---------------------------------|---|--|--|-----------|
|   | The Instru                      | ction Guide explains how to complete this   | s form.                                    | 1 Total pages Schedule A1:<br>Sch: 67/95 Rpt: 70/157 |           |
| 2 | FILER NAME<br>Carranza, Kr      | istian  |  | 3 Filer ID (Ethics Commission Fil<br>00087920        | ers)      |
| 4 | Date<br>10/24/2024              | <ul> <li>Full name of contributor</li></ul>   |  | 7 Amount of Contribution (\$) \$10,                  | 000.00    |
| _ |                                 | Washington, DC 20003  | 1  |  |           |
| 8 | Principal occu                  | pation / Job title (See Instructions)   | 9 Employer (See Instructions               | ins)   |           |
|   | Date<br>10/03/2024              | Full name of contributor out-of-state PAC (ID Powers, Sheryl  Contributor address; City; State; Zip Code                      | #:)  | Amount of Contribution (\$)                          | \$50.00   |
|   | Principal occu                  | New Waverly, TX 77358 pation / Job title (See Instructions)   | Employer (See Instructions                 | uns)   |           |
|   | Instructor                      | pation / 300 title (300 mattactions)  | SAIC                                       | 113)   |           |
|   | Date<br>10/20/2024              | Full name of contributor  | )  | Amount of Contribution (\$)                          | \$25.00   |
|   |                                 | Austin, TX 78759  |  |  |           |
|   | Principal occu<br>Policy Analys | pation / Job title (See Instructions)<br>st   | Employer (See Instructions Every Texan     | ons)   |           |
|   | Date<br>10/10/2024              | Full name of contributor out-of-state PAC (ID Quaintance, Don Contributor address; City; State; Zip Code Houston, TX 77006    | #:)  | 1  | \$25.00   |
|   | Principal occu<br>Graphic Des   | pation / Job title (See Instructions)<br>ign  | Employer (See Instructions Public Address  | ns)  |           |
|   | Date<br>10/25/2024              | Full name of contributor out-of-state PAC (ID R Brower, Cameron  Contributor address; City; State; Zip Code  Austin, TX 78723 |  | Amount of Contribution (\$) \$                       | 300.00    |
|   | Principal occu<br>DevOps Eng    | pation / Job title (See Instructions)<br>ineer  | Employer (See Instructions Digital Turbine | ns)  |           |
|   |                                 |   | •  |  |           |

|   | MONET                         | ARY POLITICAL CONTRIBUTION  | Ν        | IS   |           | SCHEDUL  | E <b>A1</b> |
|---|-------------------------------|---|----------|--|-----------|--|-------------|
|   | The Instru                    | ction Guide explains how to complete this f   | or       | m.   | 1         | Total pages Schedule A1:<br>Sch: 68/95 Rpt: 71/157 |             |
| 2 | FILER NAME<br>Carranza, Kı    | istian  |          |  | 3         | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date<br>09/27/2024            | <ul> <li>Full name of contributor  out-of-state PAC (ID#:_Rabe, Mary</li> <li>Contributor address; City; State; Zip Code</li> </ul> |          |  | 7         | Amount of Contribution (\$)                        | \$50.00     |
| 0 | Dringing agg                  | College Station, TX 77845   | ١٥       | Employer (See Instructions                       | <u>''</u> |  |             |
| 8 | Manager Manager               | pation / Job title (See Instructions)   | 9        | Employer (See Instructions Rio de Los Suenos LLC |           |  |             |
|   | Date<br>10/20/2024            | Full name of contributor  out-of-state PAC (ID#:_<br>Raffaelli, Paulo<br>Contributor address; City; State; Zip Code                 |          | )  | •         | Amount of Contribution (\$)                        | \$2.09      |
|   | Principal occu                | San Francisco, CA 94112 pation / Job title (See Instructions)   | _        | Employer (See Instructions                       | ;)<br>    |  |             |
|   | Engineer                      | padotr, cos title (see instructions)  |          | Cisco Meraki                                     | ,,        |  |             |
|   | Date<br>09/27/2024            | Full name of contributor  |          | )  |           | Amount of Contribution (\$)                        | \$100.00    |
|   |                               | San Antonio, TX 78210   |          |  |           |  |             |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)<br>d  |          | Employer (See Instructions Not Employed          | s)        |  |             |
|   | Date<br>10/09/2024            | Full name of contributor out-of-state PAC (ID#:_Randall, Roby  Contributor address; City; State; Zip Code  San Antonio, TX 78232    |          |  |           | Amount of Contribution (\$)                        | \$25.00     |
|   | •                             | pation / Job title (See Instructions) formation Security  |          | Employer (See Instructions HCA                   | 5)        |  |             |
|   | Date<br>10/10/2024            | Full name of contributor out-of-state PAC (ID#:_Ranson, Kelly  Contributor address; City; State; Zip Code  San Antonio, TX 78209    |          | )  |           | Amount of Contribution (\$)                        | \$200.00    |
|   | Principal occu<br>Real Estate | pation / Job title (See Instructions)<br>Broker   |          | Employer (See Instructions Ranson Properties     | 5)        |  |             |
|   | . 5                           |   | <u> </u> |  |           |  |             |

|   | MONET                      | ARY POLITICAL C   | ONTRIBUTION                         | IS   |                | SCHEDUL  | E <b>A1</b> |
|---|----------------------------|---|-------------------------------------|--|----------------|--|-------------|
|   | The Instru                 | ction Guide explains how  | to complete this for                | m.   | 1              | Total pages Schedule A1:<br>Sch: 69/95 Rpt: 72/157 |             |
| 2 | FILER NAME<br>Carranza, Kr | istian  |                                     |  | 3              | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date<br>10/14/2024         | 6 Contributor address; City; Sta  | out-of-state PAC (ID#:              |  | 7              | Amount of Contribution (\$)                        | \$100.00    |
| 8 | Principal occu             | Pflugerville, TX 78660 pation / Job title (See Instructions)                  | 9                                   | Employer (See Instructions                       | <u> </u><br>s) |  |             |
|   | Not Employe                |   |                                     | Not Employed                                     | ,              |  |             |
|   | Date<br>10/20/2024         | Full name of contributor<br>Real, Sheldon<br>Contributor address; City; Sta   |                                     | )  |                | Amount of Contribution (\$)                        | \$10.00     |
|   |                            | Cathedral City, CA 92234  |                                     |  |                |  |             |
|   | Principal occu  Accountant | pation / Job title (See Instructions)   |                                     | Employer (See Instructions Eisenhower Medical Ce |                | ır   |             |
|   | Date<br>10/25/2024         | Full name of contributor<br>Reichel, Lauren<br>Contributor address; City; Sta | out-of-state PAC (ID#:ate; Zip Code | )  |                | Amount of Contribution (\$)                        | \$25.00     |
|   | Principal occu             | Napa, CA 94558 pation / Job title (See Instructions)                          |                                     | Employer (See Instructions                       | ;)<br>         |  |             |
|   |                            | se Sitter and Dog Walker  |                                     | Self   | "              |  |             |
|   | Date<br>10/19/2024         | Full name of contributor  Rendon, Michael  Contributor address; City; Sta     | out-of-state PAC (ID#:ate; Zip Code | )  |                | Amount of Contribution (\$)                        | \$2.63      |
|   | Principal occu<br>Banker   | pation / Job title (See Instructions)   |                                     | Employer (See Instructions Broadway Bank         | <u>I</u><br>S) |  |             |
|   | Date<br>10/26/2024         | Full name of contributor Rendon, Michael Contributor address; City; Sta       | out-of-state PAC (ID#:              | )  |                | Amount of Contribution (\$)                        | \$4.35      |
|   | •                          | pation / Job title (See Instructions)   |                                     | Employer (See Instructions                       | 5)             |  |             |
|   | Banker                     |   |                                     | Broadway Bank                                    |                |  |             |

|   | MONET                         | ARY POLITICAL CONTRIBUTION  | DNS                                     |   | SCHEDUL  | E A1       |
|---|-------------------------------|---|---|---|--|------------|
|   | The Instru                    | ction Guide explains how to complete this f   | orm.                                    | 1 | Total pages Schedule A1:<br>Sch: 70/95 Rpt: 73/157 |            |
| 2 | FILER NAME<br>Carranza, Kı    | istian  |   | 3 | Filer ID (Ethics Commission 00087920               | on Filers) |
| 4 | Date<br>10/18/2024            | <ul> <li>Full name of contributor</li></ul>   |   | 7 | Amount of Contribution (\$)                        | \$5,000.00 |
| 8 | Principal occu                | Dallas, TX 75214 pation / Job title (See Instructions)  | 9 Employer (See Instructions            | ) |  |            |
| _ | Date 10/03/2024               | Full name of contributor out-of-state PAC (ID#:_ Ressin, Jeff Contributor address; City; State; Zip Code  Vienna, VA 22180      |   |   | Amount of Contribution (\$)                        | \$250.00   |
|   | Principal occu<br>Consultant  | pation / Job title (See Instructions)   | Employer (See Instructions<br>Self      | ) |  |            |
|   | Date<br>10/17/2024            | Full name of contributor out-of-state PAC (ID#:_<br>Reyes, Norma<br>Contributor address; City; State; Zip Code                  |   |   | Amount of Contribution (\$)                        | \$100.00   |
|   | Principal occu<br>Not Employe | San Antonio, TX 78228 pation / Job title (See Instructions)   | Employer (See Instructions Not Employed | ) |  |            |
|   | Date<br>09/27/2024            | Full name of contributor out-of-state PAC (ID#:_ Reyes, Robert  Contributor address; City; State; Zip Code  Covina, CA 91722    |   |   | Amount of Contribution (\$)                        | \$100.00   |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)   | Employer (See Instructions Not Employed | ) |  |            |
|   | Date<br>10/13/2024            | Full name of contributor out-of-state PAC (ID#:_ Richmond, Clint Contributor address; City; State; Zip Code Brookline, MA 02445 |   |   | Amount of Contribution (\$)                        | \$5.00     |
|   | Principal occu<br>Consultant  | pation / Job title (See Instructions)   | Employer (See Instructions<br>Self      | ) |  |            |
|   |                               |   |   |   |  |            |

|   | MONET                         | ARY POLITICAL CONTR   | RIBUTION             | S   |        | SCHEDUL  | E <b>A1</b> |
|---|-------------------------------|---|----------------------|---|--------|--|-------------|
|   | The Instruc                   | ction Guide explains how to comp  | olete this forr      | n.  | 1      | Total pages Schedule A1:<br>Sch: 71/95 Rpt: 74/157 |             |
| 2 | FILER NAME<br>Carranza, Kr    | istian  |                      |   | 3      | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date<br>10/21/2024            | <ul> <li>Full name of contributor  out-of-st Riklin, Rand</li> <li>Contributor address; City; State; Zip Cod</li> </ul> |                      | )   | 7      | Amount of Contribution (\$)                        | \$500.00    |
|   |                               | San Antonio, TX 78218   |                      |   |        |  |             |
| 8 | Principal occu<br>Lawyer      | pation / Job title (See Instructions)   | 9                    | Employer (See Instructions Goode Casseb Riklin C    |        | ate & Watson                                       |             |
|   | Date<br>09/28/2024            | Rivera, Ian  Contributor address; City; State; Zip Cod  |                      |   |        | Amount of Contribution (\$)                        | \$250.00    |
|   | Principal occu                | Houston, TX 77042 pation / Job title (See Instructions)   |                      | Employer (See Instructions                          | <br>s) |  |             |
|   | Regional Pol                  | litical Director  |                      | DLCC  |        |  |             |
|   | Date<br>10/04/2024            | Full name of contributor out-of-st Robinson, Riley  Contributor address; City; State; Zip Cod                           | tate PAC (ID#:<br>de |   |        | Amount of Contribution (\$)                        | \$50.00     |
|   |                               | San Antonio, TX 78210-1613  |                      |   |        |  |             |
|   | Principal occu<br>Director    | pation / Job title (See Instructions)   |                      | Employer (See Instructions<br>Artpace San Antonio   | 5)     |  |             |
|   | Date<br>09/27/2024            | Robus, Patricia   |                      | )   | •      | Amount of Contribution (\$)                        | \$25.00     |
|   | Principal occu<br>Dentist     | pation / Job title (See Instructions)   |                      | Employer (See Instructions Pediatric Dental Profess |        | nals   |             |
|   | Date<br>10/01/2024            | Rocha, Matt   |                      | )   | •      | Amount of Contribution (\$)                        | \$10.00     |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)   |                      | Employer (See Instructions Not Employed             | 5)     |  |             |
|   |                               |   | 1                    |   |        |  |             |

|   | MONET                      | ARY POLITICAL CONTRIBU   | TION    | IS                                      |           | SCHEDULI   | E <b>A1</b> |
|---|----------------------------|--|---------|---|-----------|--|-------------|
|   | The Instruc                | ction Guide explains how to complete th  | his for | m.                                      | 1         | Total pages Schedule A1:<br>Sch: 72/95 Rpt: 75/157 |             |
| 2 | FILER NAME<br>Carranza, Kr | istian   |         |   | 3         | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date<br>10/08/2024         | <ul> <li>Full name of contributor</li></ul>  |         |   | 7         | Amount of Contribution (\$)                        | \$25.00     |
| 8 | Principal occur            | Fayetteville, PA 17222 pation / Job title (See Instructions)   | l q     | Employer (See Instructions              | <u>s)</u> |  |             |
| Ŭ | Not Employe                |  |         | Not Employed                            | ٠,        |  |             |
|   | Date<br>10/06/2024         | Full name of contributor  out-of-state PAC Rodriguez, Louis  Contributor address; City; State; Zip Code            |         | )                                       |           | Amount of Contribution (\$)                        | \$25.00     |
|   | Dringing! aggr             | San Antonio, TX 78233  |         | Employer (See Instructions              | <u></u>   |  |             |
|   | Not Employe                | pation / Job title (See Instructions)<br>ed  |         | Employer (See Instructions Not Employed | 5)        |  |             |
|   | Date<br>10/24/2024         | Full name of contributor out-of-state PAC Rogers, Kathryn Contributor address; City; State; Zip Code               | (ID#:   |   |           | Amount of Contribution (\$)                        | \$5.00      |
|   |                            | Austin, TX 78757   |         |   |           |  |             |
|   | Principal occu<br>Editor   | pation / Job title (See Instructions)  |         | Employer (See Instructions Self         | s)        |  |             |
|   | Date<br>09/27/2024         | Full name of contributor out-of-state PAC Rolke, Paul Contributor address; City; State; Zip Code  Austin, TX 78704 |         | )                                       |           | Amount of Contribution (\$)                        | \$50.00     |
|   | Principal occu<br>Rancher  | pation / Job title (See Instructions)  |         | Employer (See Instructions<br>Self      | 5)        |  |             |
|   | Date<br>10/17/2024         | Full name of contributor out-of-state PAC Rolke, Paul Contributor address; City; State; Zip Code Austin, TX 78704  |         |   |           | Amount of Contribution (\$)                        | \$40.00     |
|   | Principal occu<br>Rancher  | pation / Job title (See Instructions)  |         | Employer (See Instructions<br>Self      | s)        |  |             |
|   |                            |  | •       |   |           |  |             |

|   | MONET                         | ARY POLITICAL CO   | ONTRIBUTION                       | S   |         | SCHEDUL  | E <b>A1</b> |
|---|-------------------------------|--|-----------------------------------|---|---------|--|-------------|
|   | The Instru                    | ction Guide explains how to  | o complete this form              | n.  | 1       | Total pages Schedule A1:<br>Sch: 73/95 Rpt: 76/157 |             |
| 2 | FILER NAME<br>Carranza, Kı    | istian   |                                   |   | 3       | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date<br>10/07/2024            | <ul><li>5 Full name of contributor<br/>Rose, Sherri</li><li>6 Contributor address; City; State</li></ul> |                                   |   | 7       | Amount of Contribution (\$)                        | \$50.00     |
| _ |                               | San Carlos, CA 94070   | 1.                                |   |         |  |             |
| 8 | Principal occu<br>Consultant  | pation / Job title (See Instructions)  | 9                                 | Employer (See Instructions Self                   | 5)      |  |             |
|   | Date<br>09/27/2024            | Full name of contributor  Rosenstock, Sara  Contributor address; City; State                             | out-of-state PAC (ID#:            |   |         | Amount of Contribution (\$)                        | \$100.00    |
|   | Deinsinal assu                | Encino, CA 91316   |                                   | Franks von (Cook kratusstiere                     | <u></u> |  |             |
|   | Researcher                    | pation / Job title (See Instructions)  |                                   | Employer (See Instructions Sweetum Productions    | ·)      |  |             |
|   | Date<br>10/25/2024            | Full name of contributor  Rosenthal, Ilene  Contributor address; City; State                             | out-of-state PAC (ID#:            |   |         | Amount of Contribution (\$)                        | \$100.00    |
|   |                               | Yonkers, NY 10705  |                                   |   |         |  |             |
|   | Principal occu<br>Business Ov | pation / Job title (See Instructions)<br>/ner  |                                   | Employer (See Instructions Self                   | 5)      |  |             |
|   | Date<br>09/28/2024            | Full name of contributor  Rosenthal, Jon  Contributor address; City; State  Houston, TX 77041            | out-of-state PAC (ID#:e; Zip Code |   |         | Amount of Contribution (\$)                        | \$500.00    |
|   | Principal occu<br>State Rep   | pation / Job title (See Instructions)  |                                   | Employer (See Instructions Texas House of Represe | -       | atives   |             |
|   | Date<br>10/08/2024            | Full name of contributor Rubinstein, Jacob  Contributor address; City; State  Washington, DC 20002       | out-of-state PAC (ID#:e; Zip Code | )   |         | Amount of Contribution (\$)                        | \$100.00    |
|   |                               | pation / Job title (See Instructions) nager   Pollster   |                                   | Employer (See Instructions Hit strategies         | 5)      |  |             |
|   | Sr. Data ividi                | ingor   1 Onotor   |                                   | · ··· on atogroo                                  |         |  |             |

|   | MONET                           | ARY POLITICAL CONTR  | RIBUTION       | S  |                | SCHEDUL  | E A1       |
|---|---------------------------------|--|----------------|--|----------------|--|------------|
|   | The Instruc                     | ction Guide explains how to comp                             | lete this form | n.   | 1              | Total pages Schedule A1:<br>Sch: 74/95 Rpt: 77/157 |            |
| 2 | FILER NAME<br>Carranza, Kr      | istian   |                |  | 3              | Filer ID (Ethics Commission 00087920               | n Filers)  |
| 4 | Date<br>10/10/2024              | Ruddell, Steven  6 Contributor address; City; State; Zip Coc |                | )  | 7              | Amount of Contribution (\$)                        | \$5.00     |
| 8 | Principal occu<br>Not Employe   | Kilauea, HI 96754 pation / Job title (See Instructions)      | 9              | Employer (See Instructions Not Employed            | <u> </u><br>;) |  |            |
|   | Date 10/16/2024                 | Full name of contributor out-of-sta                          |                | )  |                | Amount of Contribution (\$)                        | \$250.00   |
|   | Principal occu<br>Campaign M    | pation / Job title (See Instructions)                        |                | Employer (See Instructions Maya for Mayor          | <u>(</u>       |  |            |
|   | Date<br>10/11/2024              | Rusk, Mitzi  Contributor address; City; State; Zip Cod       | ate PAC (ID#:  |  |                | Amount of Contribution (\$)                        | \$1,027.00 |
|   | Principal occu<br>Not Employe   | Tyler, TX 75703 pation / Job title (See Instructions) d      |                | Employer (See Instructions Not Employed            | <u> </u><br>5) |  |            |
|   | Date<br>10/19/2024              | Rustum, Roohi  |                | )  |                | Amount of Contribution (\$)                        | \$25.00    |
|   | Principal occu<br>Engagement    | pation / Job title (See Instructions) Director               |                | Employer (See Instructions Boston Schools Fund     | 5)             |  |            |
|   | Date<br>10/16/2024              | Ryan, Casey  |                | )  |                | Amount of Contribution (\$)                        | \$10.00    |
|   | Principal occu<br>Project Direc | pation / Job title (See Instructions)<br>tor                 |                | Employer (See Instructions Social and Environmenta |                | ntrepreneurs                                       |            |
|   |                                 |  | •              |  |                |  |            |

|   | MONET                          | ARY POLITICAL CONTRIBUT  | TION   | IS  |                | SCHEDU   | LE <b>A1</b> |
|---|--------------------------------|--|--------|---|----------------|--|--------------|
|   | The Instruc                    | ction Guide explains how to complete thi   | is for | m.  | 1              | Total pages Schedule A1:<br>Sch: 75/95 Rpt: 78/157 |              |
| 2 | FILER NAME<br>Carranza, Kr     | istian   |        |   | 3              | Filer ID (Ethics Commission 00087920               | on Filers)   |
| 4 | Date<br>10/04/2024             | <ul> <li>Full name of contributor  out-of-state PAC (II Sachse, Christoph</li> <li>Contributor address; City; State; Zip Code</li> </ul> |        |   | 7              | Amount of Contribution (\$)                        | \$10.00      |
| 8 |                                | Austin, TX 78751 pation / Job title (See Instructions)   | 9      | Employer (See Instructions                        | <u> </u><br>s) |  |              |
|   | Date<br>10/07/2024             | Full name of contributor  out-of-state PAC (II   |        | Google LLC  |                | Amount of Contribution (\$)                        | \$100.00     |
|   | Principal occu<br>Not Employe  | pation / Job title (See Instructions)  |        | Employer (See Instructions Not Employed           | s)             |  |              |
|   | Date<br>10/05/2024             | Full name of contributor out-of-state PAC (II Sanchez, Bryan Contributor address; City; State; Zip Code                                  | D#:    |   | •              | Amount of Contribution (\$)                        | \$200.00     |
|   |                                | Houston, TX 77019  |        |   |                |  |              |
|   | Principal occu<br>Consultant   | pation / Job title (See Instructions)  |        | Employer (See Instructions Boston Consulting Grou | -              |  |              |
|   | Date<br>10/22/2024             | Full name of contributor out-of-state PAC (II Saucedo, Kim  Contributor address; City; State; Zip Code  San Antonio, TX 78255            |        | )   |                | Amount of Contribution (\$)                        | \$25.00      |
|   | Principal occu<br>Nurse Practi | pation / Job title (See Instructions)<br>tioner  |        | Employer (See Instructions Dorothy Saucedo        | 5)             |  |              |
|   | Date<br>10/05/2024             | Full name of contributor out-of-state PAC (II Sawtelle, Scott Contributor address; City; State; Zip Code San Antonio, TX 78209           |        | )   |                | Amount of Contribution (\$)                        | \$2,500.00   |
|   | Principal occu<br>Investment A | pation / Job title (See Instructions)  |        | Employer (See Instructions Nelson Van Denburg &   |                | mpbell   |              |
|   |                                |  | - 1    |   |                |  |              |

|   | MONET                          | ARY POLITICAL CO  | NTRIBUTION             | S  |   | SCHEDUL  | E A1       |
|---|--------------------------------|---|------------------------|--|---|--|------------|
|   | The Instruc                    | ction Guide explains how to   | complete this forn     | 1.   | 1 | Total pages Schedule A1:<br>Sch: 76/95 Rpt: 79/157 |            |
| 2 | FILER NAME<br>Carranza, Kr     | istian  |                        |  | 3 | Filer ID (Ethics Commission 00087920               | on Filers) |
| 4 | Date<br>10/08/2024             | Scanlan, John  6 Contributor address; City; State;  | out-of-state PAC (ID#: | )  | 7 | Amount of Contribution (\$)                        | \$1,000.00 |
| 8 | Principal occu                 | Austin, TX 78746 pation / Job title (See Instructions)  | 9                      | Employer (See Instructions                             | ) |  |            |
|   | Not Employe                    | d   |                        | Not Employed   |   |  |            |
|   | Date<br>10/13/2024             | Schaeffer, Julia Contributor address; City; State;  | out-of-state PAC (ID#: | )  |   | Amount of Contribution (\$)                        | \$25.00    |
|   | Delevie et even                | Frederick, MD 21701   |                        | Farada a a (O a a la atau atian a                      |   |  |            |
|   | Not Employe                    | pation / Job title (See Instructions)   |                        | Employer (See Instructions<br>Not Employed             | ) |  |            |
|   | Date                           |   | out-of-state PAC (ID#: | \ \  |   | Amount of Contribution (\$)                        |            |
|   | 10/06/2024                     | Scheringer, Jason  Contributor address; City; State;  |                        |  |   | (4)  | \$5.00     |
|   |                                | Nanuet, NY 10954  |                        |  |   |  |            |
|   | Principal occup                | pation / Job title (See Instructions)   |                        | Employer (See Instructions<br>Strategic Education Inc. | ) |  |            |
|   | Date<br>09/30/2024             | Full name of contributor  Schneider, Joan  Contributor address; City; State;  Seattle, WA 98106 | out-of-state PAC (ID#: | )  |   | Amount of Contribution (\$)                        | \$37.50    |
|   | Principal occup<br>Not Employe | pation / Job title (See Instructions)   |                        | Employer (See Instructions<br>Not Employed             | ) |  |            |
|   | Date<br>10/18/2024             | Full name of contributor Schroer, Steve Contributor address; City; State; Bartlett, IL 60103    | out-of-state PAC (ID#: | )  |   | Amount of Contribution (\$)                        | \$10.00    |
|   | Principal occu<br>Driver       | pation / Job title (See Instructions)   |                        | Employer (See Instructions<br>Self                     | ) |  |            |
|   |                                |   | 1                      |  |   |  |            |

|   | MONET                      | ARY POLITICAL CONT   | RIBUTION         | S  |     | SCHEDUL  | E <b>A1</b> |
|---|----------------------------|--|------------------|--|-----|--|-------------|
|   | The Instru                 | ction Guide explains how to con  | nplete this forr | n.   | 1   | Total pages Schedule A1:<br>Sch: 77/95 Rpt: 80/157 |             |
| 2 | FILER NAME<br>Carranza, Kr | istian   |                  |  | 3   | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date<br>10/24/2024         | Schroller, Alex  | state PAC (ID#:  | )  | 7   | Amount of Contribution (\$)                        | \$4.00      |
| 0 | Dringinal acqu             | Houston, TX 77005 pation / Job title (See Instructions)  | ام               | Employer (See Instructions                         | ·,  |  |             |
| 0 | Technical Tr               |  | 9                | Employer (See Instructions PROS                    | )   |  |             |
|   | Date<br>10/02/2024         | Full name of contributor out-of Schwartz, Jared Contributor address; City; State; Zip C        |                  |  |     | Amount of Contribution (\$)                        | \$20.00     |
|   | Dringinal occu             | Dallas, TX 75248 pation / Job title (See Instructions)   |                  | Employer (See Instructions                         | ·/- |  |             |
|   | Teacher                    | pation / Job title (See Instructions)  |                  | Self   | )   |  |             |
|   | Date<br>10/14/2024         | Full name of contributor out-of Sebian lander, Cynthia Contributor address; City; State; Zip C | -state PAC (ID#: | )  |     | Amount of Contribution (\$)                        | \$25.00     |
|   |                            | Huntingtown, MD 20639  | <u> </u>         |  |     |  |             |
|   | •                          | pation / Job title (See Instructions) paign and Election Specialist                            |                  | Employer (See Instructions National Education Asso |     | ation  |             |
|   | Date<br>10/04/2024         | Serna, Baltazar  | -state PAC (ID#: |  |     | Amount of Contribution (\$)                        | \$500.00    |
|   | Principal occu<br>Attorney | pation / Job title (See Instructions)  |                  | Employer (See Instructions<br>Self Employed        | 5)  |  |             |
|   | Date<br>10/10/2024         | Full name of contributor out-of Sexton, Janette  Contributor address; City; State; Zip C       | -state PAC (ID#: | )  |     | Amount of Contribution (\$)                        | \$20.23     |
|   | Principal occu<br>Retired  | pation / Job title (See Instructions)  |                  | Employer (See Instructions None                    | 5)  |  |             |
|   |                            |  | ·                |  |     |  |             |

|   | MONET                         | ARY POLITICAL CONTRIBUTION   | ON  | NS                                      |          | SCHEDUL  | E <b>A1</b> |
|---|-------------------------------|--|-----|---|----------|--|-------------|
|   | The Instru                    | ction Guide explains how to complete this  | for | m.                                      | 1        | Total pages Schedule A1:<br>Sch: 78/95 Rpt: 81/157 |             |
| 2 | FILER NAME<br>Carranza, Kr    | istian   |     |   | 3        | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date<br>10/13/2024            | <ul> <li>Full name of contributor  out-of-state PAC (ID# Shachoy, Jamey</li> <li>Contributor address; City; State; Zip Code</li> </ul> |     | )                                       | 7        | Amount of Contribution (\$)                        | \$500.00    |
| _ | <u> </u>                      | Marion, MA 02738   | ٦.  |   |          |  |             |
| 8 | Consulting                    | pation / Job title (See Instructions)  | 9   | Employer (See Instructions Accenture    | 5)       |  |             |
|   | Date<br>10/10/2024            | Contributor address; City; State; Zip Code   |     | )                                       | •        | Amount of Contribution (\$)                        | \$15.00     |
|   | Principal occu                | Seattle, WA 98117 pation / Job title (See Instructions)  | Т   | Employer (See Instructions              | <u> </u> |  |             |
|   | Not Employe                   |  |     | Not Employed                            |          |  |             |
|   | Date<br>09/27/2024            | Full name of contributor out-of-state PAC (ID# Shawver, Scott  Contributor address; City; State; Zip Code                              | :   | )                                       |          | Amount of Contribution (\$)                        | \$25.00     |
|   |                               | Lake Forest, CA 92630  |     |   |          |  |             |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)  |     | Employer (See Instructions Not Employed | 5)       |  |             |
|   | Date<br>10/06/2024            | Full name of contributor out-of-state PAC (ID# Sheikholeslami, Bahram Contributor address; City; State; Zip Code Houston, TX 77079     |     |   |          | Amount of Contribution (\$)                        | \$5.00      |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)  |     | Employer (See Instructions Not Employed | 5)       |  |             |
|   | Date<br>09/30/2024            | Full name of contributor out-of-state PAC (ID# Shelby, Laura  Contributor address; City; State; Zip Code  Houston, TX 77024            |     |   | •        | Amount of Contribution (\$)                        | \$50.00     |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)  |     | Employer (See Instructions Not Employed | 5)       |  |             |
|   |                               |  | •   |   |          |  |             |

|   | MONET                       | ARY POLITICAL CONT  | RIBUTION          | S  |         | SCHEDUI  | E A1       |
|---|-----------------------------|---|-------------------|--|---------|--|------------|
|   | The Instruc                 | ction Guide explains how to con   | nplete this forr  | m.   | 1       | Total pages Schedule A1:<br>Sch: 79/95 Rpt: 82/157 |            |
| 2 | FILER NAME<br>Carranza, Kr  | istian  |                   |  | 3       | Filer ID (Ethics Commission 00087920               | on Filers) |
| 4 | Date 10/14/2024             | <ul> <li>5 Full name of contributor  out-of Shipley, John</li> <li>6 Contributor address; City; State; Zip C</li> </ul> | f-state PAC (ID#: | )  | 7       | Amount of Contribution (\$)                        | \$200.00   |
| _ | <u> </u>                    | San Antonio, TX 78209   | la la             |  | <u></u> |  |            |
| 8 | Oil & Gas Re                | pation / Job title (See Instructions)<br>eal Estate   | 9                 | Employer (See Instructions Self                  | S)      |  |            |
|   | Date<br>10/02/2024          | Full name of contributor out-of Shute, Bill  Contributor address; City; State; Zip C                                    | f-state PAC (ID#: | )  |         | Amount of Contribution (\$)                        | \$5.00     |
|   | Dringing age                | Universal City, TX 78148  |                   | Employer (See Instructions                       | <u></u> |  |            |
|   | College Prof                | pation / Job title (See Instructions)<br>essor  |                   | Employer (See Instructions San Antonio College   | ·)      |  |            |
|   | Date<br>10/06/2024          | Full name of contributor out-of Siemers-Kennedy, Laura  Contributor address; City; State; Zip C                         | f-state PAC (ID#: | )  | •       | Amount of Contribution (\$)                        | \$5.00     |
|   |                             | Houston, TX 77019   |                   |  |         |  |            |
|   | Principal occu<br>Engineer  | pation / Job title (See Instructions)   |                   | Employer (See Instructions Mott MacDonald        | s)      |  |            |
|   | Date<br>10/08/2024          | Full name of contributor out-of Sierra Club Political Action Comm Contributor address; City; State; Zip C               |                   | )  |         | Amount of Contribution (\$)                        | \$2,000.00 |
|   | Principal occu              | pation / Job title (See Instructions)   |                   | Employer (See Instructions                       | 5)      |  |            |
|   | Date<br>10/25/2024          | Sill, Alan  | f-state PAC (ID#: |  |         | Amount of Contribution (\$)                        | \$22.73    |
|   | Principal occu<br>Scientist | pation / Job title (See Instructions)   |                   | Employer (See Instructions Texas Tech University | 5)      |  |            |
|   | Solomust                    |   |                   | Texas real offiversity                           |         |  |            |

|   | MONET                         | ARY POLITICAL CONTRIBUTION  | <b>)</b> | IS   |         | SCHEDULE   | <b>■ A1</b> |
|---|-------------------------------|---|----------|--|---------|--|-------------|
|   | The Instruc                   | ction Guide explains how to complete this f   | or       | m.   | 1       | Total pages Schedule A1:<br>Sch: 80/95 Rpt: 83/157 |             |
| 2 | FILER NAME<br>Carranza, Kr    | istian  |          |  | 3       | Filer ID (Ethics Commission 00087920               | ı Filers)   |
| 4 | Date 09/27/2024               | <ul> <li>Full name of contributor</li></ul>   |          |  | 7       | Amount of Contribution (\$)                        | \$1.00      |
| 8 | Principal occur               | Rockaway Park, NY 11694 pation / Job title (See Instructions)   | ۵        | Employer (See Instructions                       | ;)<br>  |  |             |
| 0 | Marketing                     | pation / Job title (See Instructions)   | 9        | Christine Valmy                                  | »)      |  |             |
|   | Date<br>10/21/2024            | Full name of contributor  |          | )  |         | Amount of Contribution (\$)                        | \$20.00     |
|   | Dringing aggr                 | Las Vegas, NV 89104   | _        | Employer (See Instructions                       | <u></u> |  |             |
|   | Not employe                   | pation / Job title (See Instructions)<br>d  |          | Not employed                                     | ·)      |  |             |
|   | Date<br>10/22/2024            | Full name of contributor out-of-state PAC (ID#:_Smith, Cheryl  Contributor address; City; State; Zip Code                         |          | )  |         | Amount of Contribution (\$)                        | \$50.00     |
|   |                               | Houston, TX 77098   |          |  |         |  |             |
|   | Principal occu<br>Community o | pation / Job title (See Instructions)<br>organizer  |          | Employer (See Instructions<br>Clean Water Action | 5)      |  |             |
|   | Date<br>10/04/2024            | Full name of contributor out-of-state PAC (ID#:_Smith, Christopher  Contributor address; City; State; Zip Code  Houston, TX 77005 |          | )  |         | Amount of Contribution (\$)                        | \$25.00     |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)   |          | Employer (See Instructions Not Employed          | 5)      |  |             |
|   | Date<br>09/28/2024            | Full name of contributor out-of-state PAC (ID#:_ Snell, Barry  Contributor address; City; State; Zip Code  San Antonio, TX 78209  |          |  |         | Amount of Contribution (\$)                        | \$50.00     |
|   | Principal occu<br>Lawyer      | pation / Job title (See Instructions)   |          | Employer (See Instructions Snell & Snell LP      | 5)      |  |             |
|   |                               |   | •        |  |         |  |             |

|   | MONET                         | ARY POLITICAL CONTRIBUTION   | ON  | IS  |        | SCHEDULI   | <b>■ A1</b> |
|---|-------------------------------|--|-----|---|--------|--|-------------|
|   | The Instruc                   | ction Guide explains how to complete this  | for | m.  | 1      | Total pages Schedule A1:<br>Sch: 81/95 Rpt: 84/157 |             |
| 2 | FILER NAME<br>Carranza, Kr    | istian   |     |   | 3      | Filer ID (Ethics Commission 00087920               | ı Filers)   |
| 4 | Date 10/10/2024               | <ul> <li>Full name of contributor  out-of-state PAC (ID# Snell, Barry</li> <li>Contributor address; City; State; Zip Code</li> </ul> |     | )   | 7      | Amount of Contribution (\$)                        | \$25.00     |
| _ |                               | San Antonio, TX 78209  | 1-  |   | _      |  |             |
| 8 | Principal occu<br>Lawyer      | pation / Job title (See Instructions)  | 9   | Employer (See Instructions Snell & Snell LP | 5)     |  |             |
|   | Date<br>10/10/2024            | Full name of contributor out-of-state PAC (ID# Snell, Barry  Contributor address; City; State; Zip Code                              |     | )   |        | Amount of Contribution (\$)                        | \$50.00     |
|   | Principal occu                | San Antonio, TX 78209 pation / Job title (See Instructions)  | Т   | Employer (See Instructions                  | <br>s) |  |             |
|   | Lawyer                        | ,  |     | Snell & Snell LP                            | •      |  |             |
|   | Date<br>09/27/2024            | Full name of contributor out-of-state PAC (ID# Spain, Diana Contributor address; City; State; Zip Code                               |     | )   | •      | Amount of Contribution (\$)                        | \$2.08      |
|   |                               | Austin, TX 78751   |     |   |        |  |             |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)  |     | Employer (See Instructions Not Employed     | 5)     |  |             |
|   | Date<br>10/26/2024            | Full name of contributor out-of-state PAC (ID# Spain, Diana  Contributor address; City; State; Zip Code  Austin, TX 78751            |     | )   |        | Amount of Contribution (\$)                        | \$2.08      |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)  |     | Employer (See Instructions Not Employed     | 5)     |  |             |
|   | Date<br>10/21/2024            | Full name of contributor out-of-state PAC (ID# Sparlin, Viktoria  Contributor address; City; State; Zip Code  Conway, AR 72034       |     |   | •      | Amount of Contribution (\$)                        | \$5.00      |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)  |     | Employer (See Instructions Not Employed     | s)     |  |             |
|   |                               |  |     |   |        |  |             |

|   | MONET                          | ARY POLITICAL (  | CONTRIBUTIO             | N<br> | IS<br>   |                | SCHEDUL  | E <b>A1</b> |
|---|--------------------------------|--|-------------------------|-------|--|----------------|--|-------------|
|   | The Instru                     | ction Guide explains hov   | to complete this fo     | orr   | n.   | 1              | Total pages Schedule A1:<br>Sch: 82/95 Rpt: 85/157 |             |
| 2 | FILER NAME<br>Carranza, Kr     | ristian  |                         |       |  | 3              | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date<br>10/18/2024             | <ul><li>5 Full name of contributor<br/>Spear, Caleb</li><li>6 Contributor address; City; S</li></ul> | out-of-state PAC (ID#:_ |       | )  | 7              | Amount of Contribution (\$)                        | \$25.00     |
|   |                                | Richardson, TX 75082   |                         |       |  |                |  |             |
| 8 | Principal occu<br>Regional Org | pation / Job title (See Instructions<br>ganizer  | s)<br>                  | 9     | Employer (See Instructions Battleground Texas          | 5)             |  |             |
|   | Date<br>10/03/2024             | Full name of contributor Speegle, John Contributor address; City; S                                  |                         |       | )  |                | Amount of Contribution (\$)                        | \$100.00    |
|   | Principal occu                 | San Antoino, TX 78209 pation / Job title (See Instructions   | s)                      |       | Employer (See Instructions                             | <u> </u><br>S) |  |             |
|   | Date<br>10/17/2024             | Full name of contributor<br>Stekler, Paul<br>Contributor address; City; S                            | out-of-state PAC (ID#:_ |       |  |                | Amount of Contribution (\$)                        | \$250.00    |
|   | Principal occu                 | Austin, TX 78704 pation / Job title (See Instructions  | <u>,</u>                |       | Employer (See Instructions                             | <u>s)</u>      |  |             |
|   | Not Employe                    |  | ''                      |       | Not Employed   | -,             |  |             |
|   | Date<br>10/16/2024             | Full name of contributor Stewart, Jeffrey  Contributor address; City; S  Saginaw, TX 76179           | out-of-state PAC (ID#:_ |       | )  | •              | Amount of Contribution (\$)                        | \$25.00     |
|   | Principal occu<br>Attorney     | pation / Job title (See Instructions   | 5)                      |       | Employer (See Instructions<br>Law Offices of Elizabeth |                | armer  |             |
|   | Date<br>10/10/2024             | Full name of contributor Stokes Hilton, Lee Contributor address; City; S Austin, TX 78735            | out-of-state PAC (ID#:_ |       |  | •              | Amount of Contribution (\$)                        | \$100.00    |
|   | Principal occu<br>Not Employe  | pation / Job title (See Instructionsed   | s)                      |       | Employer (See Instructions Not Employed                | S)             |  |             |
|   |                                |  |                         |       |  |                |  |             |

|   | MONET                         | ARY POLITICAL (  | CONTRIBUTIO            | N  | S   |    | SCHEDUL  | E <b>A1</b> |
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|   | The Instru                    | ction Guide explains hov   | to complete this fo    | rn | n.  | 1  | Total pages Schedule A1:<br>Sch: 83/95 Rpt: 86/157 |             |
| 2 | FILER NAME<br>Carranza, Kı    | ristian  |                        |    |   | 3  | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date<br>10/04/2024            | <ul><li>5 Full name of contributor<br/>Strickland, Joseph</li><li>6 Contributor address; City; S</li></ul> | out-of-state PAC (ID#: |    |   | 7  | Amount of Contribution (\$)                        | \$100.00    |
| _ |                               | Austin, TX 78751-3952  |                        |    |   |    |  |             |
| 8 | Principal occu<br>Owner       | pation / Job title (See Instructions   | S) [9                  |    | Employer (See Instructions More Home Slice          | 5) |  |             |
|   | Date<br>09/28/2024            | Full name of contributor Stromsness, Rune Contributor address; City; S                                     | out-of-state PAC (ID#: |    | )   |    | Amount of Contribution (\$)                        | \$9.09      |
|   | Deinsinal assu                | Oakland, CA 94607  |                        |    | Franks von (Cooks brothe stiere                     |    |  |             |
|   | IT Manager                    | pation / Job title (See Instructions   | 5)                     |    | Employer (See Instructions University of California | 5) |  |             |
|   | Date 09/27/2024               | Full name of contributor Stubblefield, Raymond Contributor address; City; S                                | out-of-state PAC (ID#: |    | )   |    | Amount of Contribution (\$)                        | \$100.00    |
|   |                               | Houston, TX 77009  |                        |    |   |    |  |             |
|   | Principal occu<br>Retired     | pation / Job title (See Instructions   | s)                     |    | Employer (See Instructions Retired                  | s) |  |             |
|   | Date<br>10/16/2024            | Full name of contributor Sumers, Kathleen Contributor address; City; S Los Angeles, CA 90068               | out-of-state PAC (ID#: |    | )   |    | Amount of Contribution (\$)                        | \$20.00     |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions   | s)                     |    | Employer (See Instructions<br>Not Employed          | 5) |  |             |
|   | Date<br>10/13/2024            | Full name of contributor Suzman, Stephen Contributor address; City; S San Francisco, CA 94114              |                        |    | )   |    | Amount of Contribution (\$)                        | \$100.00    |
|   | Principal occu<br>Landscape   | pation / Job title (See Instructions<br>Design   | 5)                     |    | Employer (See Instructions Self Employed            | s) |  |             |
|   |                               |  | <b>'</b>               |    |   |    |  |             |

|   | MONET                         | ARY POLITICAL C   | CONTRIBUTIO                             | N  | S   |         | SCHEDUI  | E A1       |
|---|-------------------------------|---|---|----|---|---------|--|------------|
|   | The Instruc                   | ction Guide explains how  | to complete this fo                     | rn | n.  | 1       | Total pages Schedule A1:<br>Sch: 84/95 Rpt: 87/157 |            |
| 2 | FILER NAME<br>Carranza, Kr    | istian  |   |    |   | 3       | Filer ID (Ethics Commission 00087920               | on Filers) |
| 4 | Date<br>10/07/2024            | <ul><li>5 Full name of contributor<br/>Swedler, David</li><li>6 Contributor address; City; St</li></ul> | out-of-state PAC (ID#:<br>ate; Zip Code |    | )   | 7       | Amount of Contribution (\$)                        | \$2.50     |
| 8 | Principal occu                | Chicago, IL 60614 pation / Job title (See Instructions  | ) [9                                    | 9  | Employer (See Instructions                      | <br>s)  |  |            |
|   | Healthcare a                  | ınalyst   |   |    | MassHealth                                      |         |  |            |
|   | Date<br>10/04/2024            | Full name of contributor Taaffe, Peter Contributor address; City; St                                    |   |    | )   |         | Amount of Contribution (\$)                        | \$100.00   |
|   |                               | Houston, TX 77005   |   |    |   | <u></u> |  |            |
|   | Principal occu<br>CPA         | pation / Job title (See Instructions  | )                                       |    | Employer (See Instructions Taaffe & Associates  | 5)      |  |            |
|   |                               |   | <u>_</u>                                |    | Taarie & Associates                             | _       |  |            |
|   | Date<br>10/13/2024            | Full name of contributor  Tanner, Louis  Contributor address; City; St                                  | out-of-state PAC (ID#:                  |    |   |         | Amount of Contribution (\$)                        | \$25.00    |
|   |                               | Austin, TX 78744  |   |    |   |         |  |            |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions  | )                                       |    | Employer (See Instructions Not Employed         | 5)      |  |            |
|   | Date<br>10/14/2024            | Full name of contributor Tawil, Melanie Contributor address; City; St San Antonio, TX 78256             |   |    |   |         | Amount of Contribution (\$)                        | \$1,000.00 |
|   | Principal occu<br>Business Ow | pation / Job title (See Instructions<br>vner  | )                                       |    | Employer (See Instructions SwipeTrack Solutions | 5)      |  |            |
|   | Date<br>09/30/2024            | Full name of contributor Taylor, Nicholas Contributor address; City; St South Pasadena, CA 910          | . ,                                     |    | )   |         | Amount of Contribution (\$)                        | \$50.00    |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions  | )                                       |    | Employer (See Instructions Not Employed         | 5)      |  |            |
|   |                               |   | 1                                       |    |   |         |  |            |

|   | MONET                      | ARY POLITICAL CONTRIBUTIO  | NS                            | SCHEDULE A1   |
|---|----------------------------|--|-------------------------------|---|
|   | The Instru                 | ction Guide explains how to complete this fo   | rm.                           | 1 Total pages Schedule A1:<br>Sch: 85/95 Rpt: 88/157  |
| 2 | FILER NAME<br>Carranza, Kı | istian   |                               | <b>3</b> Filer ID (Ethics Commission Filers) 00087920 |
| 4 | Date<br>10/02/2024         | <ul> <li>Full name of contributor</li></ul>  | )                             | 7 Amount of Contribution (\$) \$75,000.00             |
| 8 | Principal occu             | Manchaca, TX 78652 pation / Job title (See Instructions)   | 9 Employer (See Instructions) |   |
|   | Date 10/04/2024            | Full name of contributor  out-of-state PAC (ID#: Texas American Federation of Teachers Cope Fu                               | ) und                         | Amount of Contribution (\$) \$5,000.00                |
|   | Principal occu             | Austin, TX 78741 pation / Job title (See Instructions)   | Employer (See Instructions)   | )   |
|   | Date<br>10/01/2024         | Full name of contributor out-of-state PAC (ID#: Texas HDCC Contributor address; City; State; Zip Code  Austin, TX 78703      |                               | Amount of Contribution (\$) \$25,000.00               |
|   | Principal occu             | pation / Job title (See Instructions)  | Employer (See Instructions)   |   |
|   | Date<br>10/08/2024         | Full name of contributor out-of-state PAC (ID#: Texas HDCC Contributor address; City; State; Zip Code  Austin, TX 78703      |                               | Amount of Contribution (\$)<br>\$25,000.00            |
|   | Principal occu             | pation / Job title (See Instructions)  | Employer (See Instructions)   |   |
|   | Date<br>10/09/2024         | Full name of contributor out-of-state PAC (ID#: Texas Parent PAC Contributor address; City; State; Zip Code Austin, TX 78703 |                               | Amount of Contribution (\$) \$2,500.00                |
|   | Principal occu             | pation / Job title (See Instructions)  | Employer (See Instructions)   |   |
|   |                            |  |                               |   |

|   | MONET                         | ARY POLITICAL CONTRIBUTION   | ONS  |          | SCHEDULE A1  |
|---|-------------------------------|--|--|----------|--|
|   | The Instru                    | ction Guide explains how to complete this  | form.  | 1        | Total pages Schedule A1:<br>Sch: 86/95 Rpt: 89/157 |
| 2 | FILER NAME<br>Carranza, Kı    | istian   |  | 3        | Filer ID (Ethics Commission Filers)<br>00087920    |
| 4 | Date 10/13/2024               | <ul> <li>Full name of contributor</li></ul>  | :)   | 7        | Amount of Contribution (\$) \$25,000.00            |
| 8 | Principal occu                | Austin, TX 78701 pation / Job title (See Instructions)   | 9 Employer (See Instructions                 | ()       |  |
|   | Date 09/27/2024               | Full name of contributor out-of-state PAC (ID#: The Law Offices of Meritz and Reddy  Contributor address; City; State; Zip Code  |  |          | Amount of Contribution (\$) \$150.00               |
|   | Principal occu<br>Attorney    | San Antonio, TX 78209 pation / Job title (See Instructions)  | Employer (See Instructions Meritz Reddy Pllc | i)       |  |
|   | Date<br>10/21/2024            |  |  |          | Amount of Contribution (\$) \$2,500.00             |
|   | Principal occu                | New York, NY 10021<br>pation / Job title (See Instructions)  | Employer (See Instructions                   | 5)       |  |
|   | Date<br>10/12/2024            | Full name of contributor out-of-state PAC (ID#: Thomas, Patricia Contributor address; City; State; Zip Code Washington, DC 20011 |  |          | Amount of Contribution (\$) \$2.27                 |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)  | Employer (See Instructions Not Employed      | <u>(</u> |  |
|   | Date<br>09/27/2024            | Full name of contributor out-of-state PAC (ID#: Thomason, Heidi Contributor address; City; State; Zip Code San Antonio, TX 78248 | :)   |          | Amount of Contribution (\$) \$30.00                |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)  | Employer (See Instructions Not Employed      | ()       |  |
|   |                               |  |  |          |  |

|   | MONET                         | ARY POLITICAL CON   | ITRIBUTION                       | S  |          | SCHEDUI  | LE <b>A1</b> |
|---|-------------------------------|---|----------------------------------|--|----------|--|--------------|
|   | The Instruc                   | ction Guide explains how to c   | omplete this forn                | 1.   | 1        | Total pages Schedule A1:<br>Sch: 87/95 Rpt: 90/157 |              |
| 2 | FILER NAME<br>Carranza, Kr    | istian  |                                  |  | 3        | Filer ID (Ethics Commission 00087920               | on Filers)   |
| 4 | Date<br>10/14/2024            | Torrence, Christine   | ut-of-state PAC (ID#:<br>ip Code | )  | 7        | Amount of Contribution (\$)                        | \$25.00      |
| 8 | Principal occur               | San Antonio, TX 78228 pation / Job title (See Instructions)   | la la                            | Employer (See Instructions                     | ·)       |  |              |
| 0 | Not Employe                   |   |                                  | Not Employed                                   | )        |  |              |
|   | Date<br>10/02/2024            | Torres, Tomas  Contributor address; City; State; Z  | ut-of-state PAC (ID#:<br>ip Code |  |          | Amount of Contribution (\$)                        | \$5,000.00   |
|   | Principal occu                | Houston, TX 77027 pation / Job title (See Instructions)   |                                  | Employer (See Instructions                     | <u> </u> |  |              |
|   | Not Employe                   | ed  |                                  | Not Employed                                   |          |  |              |
|   | Date<br>10/09/2024            | Full name of contributor on Townsend, Joyce  Contributor address; City; State; Z                              | ut-of-state PAC (ID#:            | )  |          | Amount of Contribution (\$)                        | \$100.00     |
|   |                               | San Antonio, TX 78248   | •                                |  |          |  |              |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)   |                                  | Employer (See Instructions<br>Not Employed     | 5)       |  |              |
|   | Date<br>10/03/2024            | Turner, Chris   |                                  | )  |          | Amount of Contribution (\$)                        | \$5,000.00   |
|   | Principal occu<br>Campaign A  | pation / Job title (See Instructions)<br>ccount   |                                  | Employer (See Instructions<br>Campaign Account | 5)       |  |              |
|   | Date<br>10/21/2024            | Full name of contributor of Ulene, Richard  Contributor address; City; State; Z  Mission Viejo, CA 92692-2414 | ut-of-state PAC (ID#:ip Code     | )  |          | Amount of Contribution (\$)                        | \$15.00      |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)   |                                  | Employer (See Instructions Not Employed        | 5)       |  |              |
|   | . ,                           |   | I                                |  |          |  |              |

|   | MONEI                         | ARY POLITICAL CONTRIBUTIO  | NS  |        | SCHEDULE   | <b>A1</b> |
|---|-------------------------------|--|---|--------|--|-----------|
|   | The Instruc                   | ction Guide explains how to complete this fo   | rm.   | 1      | Total pages Schedule A1:<br>Sch: 88/95 Rpt: 91/157 |           |
| 2 | FILER NAME<br>Carranza, Kr    | ristian  |   | 3      | Filer ID (Ethics Commission 00087920               | Filers)   |
| 4 | Date<br>10/16/2024            | <ul> <li>Full name of contributor</li></ul>  | )   | 7      | Amount of Contribution (\$)                        | \$25.00   |
| 8 | Principal occu<br>Not Employe |  | Employer (See Instructions     Not Employed | <br>s) |  |           |
|   | Date<br>10/15/2024            | Full name of contributor out-of-state PAC (ID#: Vale, Theresa  Contributor address; City; State; Zip Code  San Antonio, TX 78228 |   |        | Amount of Contribution (\$)                        | \$50.00   |
|   | Principal occu<br>Retired     | pation / Job title (See Instructions)  | Employer (See Instructions Retired          | s)     |  |           |
|   | Date<br>10/07/2024            | Full name of contributor out-of-state PAC (ID#:_<br>Van Horn Harris, Mary Frances  Contributor address; City; State; Zip Code    |   |        | Amount of Contribution (\$)                        | \$25.00   |
|   | Principal occu<br>Not Employe | Cantonment, FL 32533 pation / Job title (See Instructions)   | Employer (See Instructions Not Employed     | <br>s) |  |           |
|   | Date 10/17/2024               | Full name of contributor out-of-state PAC (ID#: Van Horn Harris, Mary Frances  Contributor address; City; State; Zip Code        | Not Employed                                | _      | Amount of Contribution (\$)                        | \$20.00   |
|   | Principal occu<br>Not Employe | Cantonment, FL 32533-8267 pation / Job title (See Instructions)  | Employer (See Instructions Not Employed     | s)     |  |           |
|   | Date<br>10/03/2024            | Full name of contributor out-of-state PAC (ID#:_Vance, Mike  Contributor address; City; State; Zip Code  Fayetteville, TX 78940  |   |        | Amount of Contribution (\$)                        | \$25.00   |
|   | Principal occu<br>Writer      | pation / Job title (See Instructions)  | Employer (See Instructions<br>Self          | s)     |  |           |
|   |                               |  |   |        |  |           |

|   | MONET                         | ARY POLITICAL CONTRIBU  | ITION   | IS                                      |                | SCHEDULI   | E <b>A1</b> |
|---|-------------------------------|---|---------|---|----------------|--|-------------|
|   | The Instruc                   | ction Guide explains how to complete t  | his for | m.                                      | 1              | Total pages Schedule A1:<br>Sch: 89/95 Rpt: 92/157 |             |
| 2 | FILER NAME<br>Carranza, Kr    | istian  |         |   | 3              | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date<br>10/25/2024            | <ul> <li>Full name of contributor</li></ul>   |         |   | 7              | Amount of Contribution (\$)                        | \$10.00     |
| 8 | Principal occu                | Warwick, RI 02886 pation / Job title (See Instructions)   | 9       | Employer (See Instructions              | <u> </u><br>s) |  |             |
|   | Not Employe                   |   |         | Not Employed                            | ,              |  |             |
|   | Date<br>10/24/2024            | Full name of contributor out-of-state PAC Vasquez, Alice Contributor address; City; State; Zip Code                           |         | )                                       |                | Amount of Contribution (\$)                        | \$15.00     |
|   | Dringinal occur               | New Braunfels, TX 78132 pation / Job title (See Instructions)   |         | Employer (See Instructions              | ·/-            |  |             |
|   |                               | epresentative   |         | Employer (See Instructions lbex         | o)             |  |             |
|   | Date<br>09/28/2024            | Full name of contributor out-of-state PAC Villarreal, Helen Contributor address; City; State; Zip Code                        | (ID#:   | )                                       | •              | Amount of Contribution (\$)                        | \$9.00      |
|   |                               | San Antonio, TX 78214   |         |   |                |  |             |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)<br>d  |         | Employer (See Instructions Not Employed | s)             |  |             |
|   | Date<br>10/21/2024            | Full name of contributor out-of-state PAC Vilvaray, Balaji Contributor address; City; State; Zip Code Frisco, TX 75034        |         |   | •              | Amount of Contribution (\$)                        | \$10.00     |
|   | Principal occu<br>o9          | pation / Job title (See Instructions)   |         | Employer (See Instructions Director     | 5)             |  |             |
|   | Date<br>10/24/2024            | Full name of contributor out-of-state PAC Waddell, Elizabeth Contributor address; City; State; Zip Code San Antonio, TX 78006 | C (ID#: |   |                | Amount of Contribution (\$)                        | \$50.00     |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)<br>d  |         | Employer (See Instructions Not Employed | s)             |  |             |
|   |                               |   | l       |   |                |  |             |

|   | MONET                         | ARY POLITICAL CONTRIBUT  | ΓΙΟΝ   | IS  |          | SCHEDULI   | <b>■ A1</b> |
|---|-------------------------------|--|--------|---|----------|--|-------------|
|   | The Instruc                   | ction Guide explains how to complete th  | is for | m.  | 1        | Total pages Schedule A1:<br>Sch: 90/95 Rpt: 93/157 |             |
| 2 | FILER NAME<br>Carranza, Kr    | ristian  |        |   | 3        | Filer ID (Ethics Commission 00087920               | ı Filers)   |
| 4 | Date<br>10/19/2024            | <ul> <li>Full name of contributor</li></ul>  |        |   | 7        | Amount of Contribution (\$)                        | \$25.00     |
| 8 | Principal occu                | San Antonio, TX 78212 pation / Job title (See Instructions)  | 9      | Employer (See Instructions                        | <u> </u> |  |             |
|   | Not Employe                   |  |        | Not Employed                                      | ,        |  |             |
|   | Date<br>10/14/2024            | Full name of contributor  out-of-state PAC (I<br>Walker, Christopher<br>Contributor address; City; State; Zip Code       |        | )   | •        | Amount of Contribution (\$)                        | \$25.00     |
|   | Dringing! aggs                | Port Matilda, PA 16870   |        | Employer (Coo Instructions                        | <u></u>  |  |             |
|   | Not Employe                   | pation / Job title (See Instructions)<br>ed  |        | Employer (See Instructions Not Employed           | o)       |  |             |
|   | Date 09/28/2024               | Full name of contributor out-of-state PAC (I Walmus, Adam Contributor address; City; State; Zip Code                     | D#:    |   |          | Amount of Contribution (\$)                        | \$20.00     |
|   |                               | Austin, TX 78759-7329  |        |   |          |  |             |
|   | Principal occu<br>Not Employe | pation / Job title (See Instructions)<br>ed  |        | Employer (See Instructions Not Employed           | s)       |  |             |
|   | Date<br>10/16/2024            | Full name of contributor out-of-state PAC (I Walsh, John Contributor address; City; State; Zip Code Washington, DC 20016 |        |   | •        | Amount of Contribution (\$)                        | \$6.25      |
|   | Principal occu<br>Researcher  | pation / Job title (See Instructions)  |        | Employer (See Instructions Washington Office on L |          | ı America  |             |
|   | Date<br>10/26/2024            | Full name of contributor out-of-state PAC (I Ward, M  Contributor address; City; State; Zip Code  Pflugerville, TX 78660 |        |   |          | Amount of Contribution (\$)                        | \$4.17      |
|   | Principal occu                | pation / Job title (See Instructions)  |        | Employer (See Instructions Ascension              | 5)       |  |             |
|   |                               |  | •      |   |          |  |             |

|   | MONET                          | ARY POLITICAL CONT   | RIBUTION          | IS  |         | SCHEDUL  | E <b>A1</b> |
|---|--------------------------------|--|-------------------|---|---------|--|-------------|
|   | The Instru                     | ction Guide explains how to con  | nplete this for   | n.  | 1       | Total pages Schedule A1:<br>Sch: 91/95 Rpt: 94/157 |             |
| 2 | FILER NAME<br>Carranza, Kı     | ristian  |                   |   | 3       | Filer ID (Ethics Commission 00087920               | n Filers)   |
| 4 | Date<br>10/09/2024             | Warren, Judith   | f-state PAC (ID#: | )   | 7       | Amount of Contribution (\$)                        | \$50.00     |
|   |                                | College Station, TX 77840  |                   |   |         |  |             |
| 8 | Principal occu<br>Professor    | pation / Job title (See Instructions)  | 9                 | Employer (See Instructions Texas A&M AgriLife Ext |         | sion   |             |
|   | Date<br>10/25/2024             | Full name of contributor out-of Warren, Luke Contributor address; City; State; Zip C   |                   |   |         | Amount of Contribution (\$)                        | \$10.00     |
|   | Dringing agg                   | Washington, DC 20002   |                   | Employer (See Instructions                        | <u></u> |  |             |
|   | Board Game                     | pation / Job title (See Instructions)<br>Licensor                                      |                   | Self Employed                                     | ·)      |  |             |
|   | Date<br>10/16/2024             | Full name of contributor out-of Watson, Taylor Contributor address; City; State; Zip C | f-state PAC (ID#: | )   | •       | Amount of Contribution (\$)                        | \$15.00     |
|   |                                | San Antonio, TX 78209  |                   |   |         |  |             |
|   | Principal occu<br>Consultant   | pation / Job title (See Instructions)  |                   | Employer (See Instructions Taylor Watson          | 5)      |  |             |
|   | Date<br>10/26/2024             | Webster, Michael   |                   | )   | •       | Amount of Contribution (\$)                        | \$250.00    |
|   | Principal occu<br>Musician/Pro | pation / Job title (See Instructions) ofessor  |                   | Employer (See Instructions Rice University        | 5)      |  |             |
|   | Date<br>09/30/2024             | Welsh, Eric  | f-state PAC (ID#: | )   | •       | Amount of Contribution (\$)                        | \$10.00     |
|   | Principal occu<br>Software De  | pation / Job title (See Instructions)  |                   | Employer (See Instructions Eric Welsh             | 5)      |  |             |
|   |                                | 1/   | l                 |   |         |  |             |

|   | MONET                            | ARY POLITICAL CONTRIBUTI   | ON       | IS                                      |    | SCHEDUL  | E <b>A1</b> |
|---|----------------------------------|--|----------|---|----|--|-------------|
|   | The Instruc                      | ction Guide explains how to complete this  | for      | m.                                      | 1  | Total pages Schedule A1:<br>Sch: 92/95 Rpt: 95/157 |             |
| 2 | FILER NAME<br>Carranza, Kr       | istian   |          |   | 3  | Filer ID (Ethics Commissio 00087920                | n Filers)   |
| 4 | Date 09/29/2024                  | <ul> <li>Full name of contributor  out-of-state PAC (ID# Welsh, Michael</li> <li>Contributor address; City; State; Zip Code</li> </ul> |          | )                                       | 7  | Amount of Contribution (\$)                        | \$1.00      |
|   |                                  | Cockeysville, MD 21030   |          |   |    |  |             |
| 8 | Principal occu<br>Sales          | pation / Job title (See Instructions)  | 9        | Employer (See Instructions Salesforce   | 5) |  |             |
|   | Date<br>09/28/2024               | Full name of contributor out-of-state PAC (ID# Wheless, Rebecca Contributor address; City; State; Zip Code                             |          | )                                       |    | Amount of Contribution (\$)                        | \$15.00     |
|   | Dringinal occu                   | Lynnwood, WA 98036 pation / Job title (See Instructions)   | _        | Employer (See Instructions              | ·/ |  |             |
|   | Circulation                      | pation / Job title (See Instructions)  |          | Beacon Publishing                       | ·) |  |             |
|   | Date<br>10/12/2024               | Full name of contributor out-of-state PAC (ID# White, Bonnie  Contributor address; City; State; Zip Code                               | :        | )                                       |    | Amount of Contribution (\$)                        | \$250.00    |
|   |                                  | Galveston, TX 77554  |          |   |    |  |             |
|   | Principal occu<br>Not Employe    | pation / Job title (See Instructions)<br>d   |          | Employer (See Instructions Not Employed | 5) |  |             |
|   | Date<br>10/02/2024               | Full name of contributor out-of-state PAC (ID# Wilson, Paul Contributor address; City; State; Zip Code Houston, TX 77005               |          | )                                       |    | Amount of Contribution (\$)                        | \$75.00     |
|   | Principal occu<br>Not Employe    | pation / Job title (See Instructions)  |          | Employer (See Instructions Not Employed | 5) |  |             |
|   | Date<br>10/07/2024               | Full name of contributor out-of-state PAC (ID# Wilson, Walter  Contributor address; City; State; Zip Code  San Antonio, TX 78210       |          |   |    | Amount of Contribution (\$)                        | \$100.00    |
|   | Principal occu<br>Political Scie | pation / Job title (See Instructions)  |          | Employer (See Instructions UTSA         | 5) |  |             |
|   | . omiour out                     |  | <u>l</u> |   |    |  |             |

|   | MONET                          | ARY POLITICAL CONTI   | RIBUTION        | S  |   | SCHEDU   | LE <b>A1</b> |
|---|--------------------------------|---|-----------------|--|---|--|--------------|
|   | The Instruc                    | ction Guide explains how to com   | plete this forn | n.   | 1 | Total pages Schedule A1:<br>Sch: 93/95 Rpt: 96/157 |              |
| 2 | FILER NAME<br>Carranza, Kr     | istian  |                 |  | 3 | Filer ID (Ethics Commission 00087920               | ion Filers)  |
| 4 | Date<br>09/28/2024             | <ul> <li>5 Full name of contributor  out-of-s</li> <li>Wood, Raleigh</li> <li>6 Contributor address; City; State; Zip Co</li> </ul> | state PAC (ID#: | )  | 7 | Amount of Contribution (\$)                        | \$100.00     |
| 8 | Dringinal accu                 | San Antonio, TX 78212 pation / Job title (See Instructions)   | ام              | Employer (See Instructions                     |   |  |              |
| 0 | Forensic Psy                   |   |                 | Self-employed                                  | ) |  |              |
|   | Date<br>10/21/2024             | Wood, Raleigh  Contributor address; City; State; Zip Co   |                 | )  |   | Amount of Contribution (\$)                        | \$250.00     |
|   | Principal occu                 | pation / Job title (See Instructions)   |                 | Employer (See Instructions                     | ) |  |              |
|   | Forensic Psy                   |   |                 | Self-employed                                  | , |  |              |
|   | Date<br>10/05/2024             | Full name of contributor out-of-s Woods, Diane Contributor address; City; State; Zip Co   | state PAC (ID#: |  |   | Amount of Contribution (\$)                        | \$100.00     |
|   |                                | Universal City, TX 78148  |                 |  |   |  |              |
|   | Principal occu<br>Not Employe  | pation / Job title (See Instructions)   |                 | Employer (See Instructions Not Employed        | ) |  |              |
|   | Date<br>09/29/2024             | Wu, Eugene  | state PAC (ID#: | )  |   | Amount of Contribution (\$)                        | \$1,000.00   |
|   | Principal occu<br>Attorney     | pation / Job title (See Instructions)   |                 | Employer (See Instructions<br>Self             | ) |  |              |
|   | Date<br>10/21/2024             | Wynn, Anne  | otate PAC (ID#: | )  |   | Amount of Contribution (\$)                        | \$15,000.00  |
|   | Principal occu<br>Self-employe | pation / Job title (See Instructions)   |                 | Employer (See Instructions Anne Elizabeth Wynn | ) |  |              |
|   | - Эси- <del>с</del> итрюуе     |   |                 | Tunic Enzapeut Wyfiif                          |   |  |              |

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

| MONETARY POLITICAL CONTRIBUTIONS |   |   |   |                             | SCHEDUL  | .E <b>А1</b> |
|----------------------------------|---|---|---|-----------------------------|--|--------------|
|                                  | The Instru  | ection Guide explains how to complete this f  | form.                                   | 1                           | Total pages Schedule A1:<br>Sch: 95/95 Rpt: 98/157 |              |
| 2                                | FILER NAME<br>Carranza, Kı  |   |   | 3                           | Filer ID (Ethics Commission 00087920               | n Filers)    |
| 4                                | Date<br>10/09/2024  | <ul> <li>Full name of contributor  out-of-state PAC (ID#:_walker-Walton, Tiffany</li> <li>Contributor address; City; State; Zip Code</li> </ul> |   | 7                           | Amount of Contribution (\$)                        | \$10.00      |
|                                  | Delevired oppos   | Windcrest, TX 78239   | To Family on (Con Instruction           |                             |  |              |
| 8                                | Complaint A   | upation / Job title (See Instructions)<br>Advisor   | 9 Employer (See Instructions USAA       | is)                         |  |              |
|                                  | Date Full name of contributor out-of-state PAC (ID#:)  10/03/2024 warner, david  Contributor address; City; State; Zip Code |   |   | Amount of Contribution (\$) | \$100.00   |              |
|                                  | Principal occu  | Austin, TX 78731  upation / Job title (See Instructions) ed   | Employer (See Instructions Not Employed | ls)                         |  |              |
|                                  | Date<br>10/06/2024  | Full name of contributor out-of-state PAC (ID#:_warner, david  Contributor address; City; State; Zip Code                                       | )                                       |                             | Amount of Contribution (\$)                        | \$100.00     |
|                                  | Principal occu  | Austin, TX 78731  upation / Job title (See Instructions)  | Employer (See Instructions Not Employed | ls)                         |  |              |
|                                  |   |   |   |                             |  |              |

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

| The Instru   | uction Guide explains how to complete this f  | 1 Total pages Sche<br>Sch: 1/3 Rpt: 9                     |   |   |  |  |
|--|---|---|---|---|--|--|
| 2 FILER NAME<br>Carranza, k  |   | 3 Filer ID (Ethics 00087920                               | Commission Filers)  |   |  |  |
| 4 TOTAL OF   | UNITEMIZED IN-KIND POLITICAL CONTRIB  | UTIONS  | \$  |   |  |  |
| 5 Date<br>10/01/2024   | 6 Full name of contributor out-of-state PAC (ID#:Annie's List  7 Contributor address; City; State; Zip Code  Austin, TX 78703 |   | contribution (\$)  <br>\$720.00   C                       | In-kind contribution description Calltime Software  |  |  |
| 10 Principal occ   | upation / Job title (FOR NON-JUDICIAL) (See instructions)   | 11 Employer (FOR NON                                      |   | ·   |  |  |
| 12 Contributor's   | principal occupation (FOR JUDICIAL)   | 13 Contributor's job title                                | (FOR JUDICIAL) (S   | ee instructions)  |  |  |
| 14 Contributor's   | employer/law firm (FOR JUDICIAL)  | 15 Law firm of contributo                                 | r's spouse (if any) (FC                                   | OR JUDICIAL)  |  |  |
| <b>16</b> If contributor   | is a child, law firm of parent(s) (if any) (FOR JUDICIAL)   |   |   |   |  |  |
| Date<br>10/26/2024   | Full name of contributor out-of-state PAC (ID#:   |   |   | In-kind contribution<br>description<br>Staff Time and Travel<br>Expenses                  |  |  |
|  | New York, NY 10163  |   | Check if travel outs                                      | side of Texas. Complete Schedule T.   |  |  |
| Principal occ  | upation / Job title (FOR NON-JUDICIAL) (See instructions)   | Employer (FOR NON   | -JUDICIAL) (See inst                                      | tructions)  |  |  |
| Contributor's  | principal occupation (FOR JUDICIAL)   | Contributor's job title                                   | Contributor's job title (FOR JUDICIAL) (See instructions) |   |  |  |
| Contributor's  | employer/law firm (FOR JUDICIAL)  | Law firm of contributo                                    | r's spouse (if any) (FC                                   | OR JUDICIAL)  |  |  |
| If contributor   | is a child, law firm of parent(s) (if any) (FOR JUDICIAL)   |   |   |   |  |  |
| Date<br>10/25/2024   | Contributor address; City; State; Zip Code  |   |   | In-kind contribution<br>description<br>Canvassing, Direct Mail<br>and Digital Advertising |  |  |
| Principal occ  | Austin, TX 78701  upation / Job title (FOR NON-JUDICIAL) (See instructions)   | Employer (FOR NON   |   | side of Texas. Complete Schedule T.   |  |  |
| Contributor's principal occupation (FOR JUDICIAL)  Contributor's job title (FOR JUDICIAL)                |   |   |   | ee instructions)  |  |  |
|  |   | 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   | If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)  |   |   |   |  |  |
|  |   |   |   |   |  |  |

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

| The Instru  | ection Guide explains how to complete this f                             | 1 Total pages Schedule A2:<br>Sch: 2/3 Rpt: 100/157 |  |  |  |  |
|---|--|---|--|--|--|--|
| 2 FILER NAME  |  | 3 Filer ID (Ethics Commission Filers)               |  |  |  |  |
| Carranza, K   | เกรนลก   |   | 00087920   |  |  |  |
| 4 TOTAL OF  | UNITEMIZED IN-KIND POLITICAL CONTRIB                                     | UTIONS  | \$   |  |  |  |
| <b>5</b> Date   | 6 Full name of contributor out-of-state PAC (ID#:                        | )   | 8 Amount of 9 In-kind contribution contribution (\$) description |  |  |  |
| 10/08/2024  | Represent Texas  |   | \$428.57 I GOTV Rides to the Polls                               |  |  |  |
|   | 7 Contributor address; City; State; Zip Code                             |   | with RideShare2Vote  |  |  |  |
|   |  |   | į į  |  |  |  |
|   | Dolloo TV 75214  |   | _  |  |  |  |
| 10 Drive in all acco  | Dallas, TX 75214   | 11 Franks von (FOD NON                              | Check if travel outside of Texas. Complete Schedule T.           |  |  |  |
| 10 Principal occi   | upation / Job title (FOR NON-JUDICIAL) (See instructions)                | 11 Employer (FOR NON                                | I-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 contribute                           | or's spouse (if any) (FOR JUDICIAL)                              |  |  |  |
|   |  |   |  |  |  |  |
| 16 If contributor   | is a child, law firm of parent(s) (if any) (FOR JUDICIAL)                |   |  |  |  |  |
|   |  |   |  |  |  |  |
| Date  | Full name of contributor out-of-state PAC (ID#:                          | )   | Amount of In-kind contribution                                   |  |  |  |
| 09/30/2024  | Texas Democratic Party   |   | contribution (\$) description                                    |  |  |  |
|   | Contributor address; City; State; Zip Code                               |   | \$7,059.241 Salary, Payroll Taxes and                            |  |  |  |
|   |  |   | I I I  |  |  |  |
|   |  |   | į į  |  |  |  |
|   | Austin, TX 78761   | 1   | Check if travel outside of Texas. Complete Schedule T.           |  |  |  |
| Principal occı  | upation / Job title (FOR NON-JUDICIAL) (See instructions)                | Employer (FOR NON                                   | I-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 contribute                              | or's spouse (if any) (FOR JUDICIAL)                              |  |  |  |
|   |  |   |  |  |  |  |
| If contributor  | is a child, law firm of parent(s) (if any) (FOR JUDICIAL)                |   |  |  |  |  |
|   |  |   |  |  |  |  |
| Date  | Full name of contributor  out-of-state PAC (ID#:                         | )   | Amount of In-kind contribution contribution (\$) description     |  |  |  |
| 10/26/2024  | Texas Organizing Project PAC   |   | \$27,861.00 Printing, Advertising and                            |  |  |  |
|   | Contributor address; City; State; Zip Code                               |   | Staff Time   |  |  |  |
|   |  |   | i  |  |  |  |
|   | Con Antonio TV 70212   |   | _  |  |  |  |
| 5   | San Antonio, TX 78212  | T = 1 (500 NO)                                      | Check if travel outside of Texas. Complete Schedule T.           |  |  |  |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) (See instructions) |  |   |  |  |  |  |
| Contributor's   | principal occupation (FOR JUDICIAL)                                      | (FOR JUDICIAL) (See instructions)                   |  |  |  |  |
|   |  |   |  |  |  |  |
| Contributor's employer/law firm (FOR JUDICIAL)  Law firm of contributor's spouse (if any) (FOR JUDICIAL)              |  |   |  |  |  |  |
|   |  |   |  |  |  |  |
| If contributor  | If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) |   |  |  |  |  |
|   |  |   |  |  |  |  |
|   |  |   |  |  |  |  |

| NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                              | L                          |             | SCHEDULE A2  |
|---|----------------------------|-------------|--|
| The Instruction Guide explains how to complete this                         | form.                      | 1           | Total pages Schedule A2:<br>Sch: 3/3 Rpt: 101/157  |
| 2 FILER NAME  |                            | 3           | Filer ID (Ethics Commission Filers)  |
| Carranza, Kristian  |                            |             | 00087920   |
| TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIB                               | BUTIONS                    | \$          |  |
| 5 Date 09/29/2024 6 Full name of contributor out-of-state PAC (ID#:         |                            | 8           | Amount of contribution (\$) In-kind contribution description \$350.00   Fundraiser Refreshments and Food  Check if travel outside of Texas. Complete Schedule T. |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)   | 11 Employer (FOR NON       | -JU         |  |
| Texas State Representative  | Texas                      | <u>/F.C</u> | AD HIDICIAL) (Conjuntions)   |
| 12 Contributor's principal occupation (FOR JUDICIAL)                        | 13 Contributor's job title | (FC         | OR JUDICIAL) (See instructions)  |
| 14 Contributor's employer/law firm (FOR JUDICIAL)                           | 15 Law firm of contributo  | or's        | spouse (if any) (FOR JUDICIAL)   |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | I.                         |             |  |
|   |                            |             |  |

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Loan Repayment/Reimbursement Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Legal Services 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)

|   | Credit Card Payment                                 | The Instruction Guide explains how to compl                          | ete this form. |                         |                            |
|---|---|--|----------------|-------------------------|----------------------------|
| 1 | Total pages Schedule F1:                            | 2 FILER NAME   | 3              | Filer ID                | (Ethics Commission Filers) |
|   | Sch: 1/55 Rpt:                                      | Carranza, Kristian   |                | 00087920                |                            |
| 4 | Date  | 5 Payee name   |                |                         |                            |
|   | 10/16/2024  | 3D Signs   |                |                         |                            |
| 6 | Amount (\$)   | 7 Payee address; City; State; Zip Code                               |                |                         |                            |
|   | \$703.63  | 8015 W 2nd St  |                |                         |                            |
|   |   |  |                |                         |                            |
|   |   | Somerset, TX 78069   |                |                         |                            |
| 8 | PURPOSE   |  | Description    |                         |                            |
| • | OF  | Printing Expense   |                | ıtside of Texas. Com    | plete Schedule T.          |
|   | EXPENDITURE   |  | _              | ΓX, officeholder living | expense                    |
|   |   |  | Outdoor Signs  |                         |                            |
|   |   |  |                |                         |                            |
| 9 | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought                            |                | Office he               | eld                        |
|   | experiorare to benefit C/O                          | '  |                |                         |                            |
|   | Date  | Payee name   |                |                         |                            |
|   | 10/22/2024  | 3D Signs   |                |                         |                            |
|   | Amount (\$)   | Payee address; City; State; Zip Code                                 |                |                         |                            |
|   | \$400.00  | 8015 W 2nd St  |                |                         |                            |
|   |   |  |                |                         |                            |
|   |   | Somerset, TX 78069   |                |                         |                            |
|   | PURPOSE   | (a) Category (See Categories listed at the top of this schedule) (b) | Description    |                         |                            |
|   | OF<br>EXPENDITURE                                   | Advertising Expense  |                | ıtside of Texas. Com    | plete Schedule T.          |
|   | EXPENDITORE   | - '  | _              | ΓX, officeholder living | expense                    |
|   |   |  | 2 x 4 Signs    |                         |                            |
|   | Operation ONLY & Street                             | Out district Office helder a series                                  |                | 0#:                     | .1.1                       |
|   | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought                            |                | Office he               | eia                        |
|   |   |  |                |                         |                            |
|   | Date  | Payee name   |                |                         |                            |
|   | 10/21/2024  | 7-ELEVEN   |                |                         |                            |
|   | Amount (\$)   | Payee address; City; State; Zip Code                                 |                |                         |                            |
|   | \$28.48   | 513 Pat Booker Rd  |                |                         |                            |
|   |   |  |                |                         |                            |
|   |   | Universal City, TX 78148   |                |                         |                            |
|   | PURPOSE   | (a) Category (See Categories listed at the top of this schedule) (b) | Description    |                         |                            |
|   | OF<br>EXPENDITURE                                   | Travel In District   | ш              | itside of Texas. Com    |                            |
|   |   |  | Transportation | TX, officeholder living | expense                    |
|   |   |  | παπομοπατίθη   | , <b>J</b> uJ           |                            |
|   | Complete ONLY if direct                             | Candidate/Officeholder name Office sought                            |                | Office he               | ald                        |
|   | expenditure to benefit C/OI                         |  |                | Office He               | Ju                         |
|   |   |  |                |                         |                            |
|   |   |  |                |                         |                            |
|   |   |  |                |                         |                            |

### SCHEDULE F1

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

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| l        | Credit Card Payment        | The Instruction Guide explains how to complete this form.  |   |
|----------|----------------------------|--|---|
| 1        | Total pages Schedule F1:   |  | _ |
|          | Sch: 2/55 Rpt:             | Carranza, Kristian 00087920  |   |
| 4        | Date                       | 5 Payee name   | _ |
|          | 10/04/2024                 | AHSA Property  |   |
| 6        | Amount (\$)                | 7 Payee address; City; State; Zip Code   | _ |
| l        | \$1,741.99                 | 2919 Sable Crossing  |   |
| l        |                            |  |   |
|          |                            | San Antonio, TX 78232  |   |
| 8        | PURPOSE                    | (a) Category (See Categories listed at the top of this schedule) (b) Description   | _ |
|          | OF<br>EXPENDITURE          | Office Overhead/Rental Expense   Check if travel outside of Texas. Complete Schedule T.  |   |
|          | EXI ENDITORE               | Check if Austin, TX, officeholder living expense   |   |
|          |                            | Rent   |   |
| 9        | Complete ONLY if direct    | Candidate/Officeholder name Office sought Office held  | _ |
|          | expenditure to benefit C/O |  |   |
| ⊨        | Date                       | Davida nama  | _ |
|          | 10/25/2024                 | Payee name AT&T  |   |
| L        |                            |  |   |
|          | Amount (\$)                | Payee address; City; State; Zip Code   |   |
|          | \$55.53                    | 208 S Akard St   |   |
| l        |                            | D. II TV 75000   |   |
| L        |                            | Dallas, TX 75202   |   |
| l        | PURPOSE<br>OF              | (a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if the real outside of Tayon Complete Categories To |   |
|          | EXPENDITURE                | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense      |   |
|          |                            | Phone Services   |   |
|          |                            |  |   |
| Г        | Complete ONLY if direct    | Candidate/Officeholder name Office sought Office held  |   |
|          | expenditure to benefit C/O | 1  |   |
|          | Date                       | Payee name   |   |
|          | 09/29/2024                 | ActBlue  |   |
|          | Amount (\$)                | Payee address; City; State; Zip Code   |   |
| l        | \$1,161.26                 | 366 Summer St  |   |
| l        |                            |  |   |
| l        |                            | Somerville, MA 02160   |   |
| Г        | PURPOSE                    | (a) Category (See Categories listed at the top of this schedule) (b) Description   | _ |
| l        | OF<br>EXPENDITURE          | Solicitation/Fundraising Expense   |   |
| l        | LAFENDITORE                | Check if Austin, TX, officeholder living expense   |   |
|          |                            | Fundraising Service Fee  |   |
| $\vdash$ | Complete ONLY if direct    | Candidate/Officeholder name Office sought Office held  |   |
|          | expenditure to benefit C/O |  |   |
|          |                            |  |   |
|          |                            |  |   |
|          |                            |  |   |

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

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

#### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| Candidate/Officenoider/Politic                              | al Committee Legal Services Salaries/wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.   |
|---|--|
| 1 Total pages Schedule F1:                                  | 2 FILER NAME 3 Filer ID (Ethics Commission Filers)   |
| Sch: 4/55 Rpt:  | Carranza, Kristian 00087920  |
| 4 Date  | 5 Payee name   |
| 10/20/2024  | ActBlue  |
| 6 Amount (\$)<br>\$323.33                                   | 7 Payee address; City; State; Zip Code<br>366 Summer St  |
|   | Somerville, MA 02160   |
| 8 PURPOSE<br>OF<br>EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule)  Solicitation/Fundraising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Fundraising Service Fee |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/C | Candidate/Officeholder name Office sought Office held OH   |
| Date  | Payee name   |
| 10/02/2024  | Adobe, Inc   |
| Amount (\$)<br>\$24.89                                      | Payee address; City; State; Zip Code  345 Park Ave   |
|   | San Jose, CA 95110   |
| PURPOSE<br>OF<br>EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Software                   |
| Complete ONLY if direct expenditure to benefit C/C          | Candidate/Officeholder name Office sought Office held OH   |
| Date  | Payee name   |
| 10/09/2024  | Adobe, Inc   |
| Amount (\$) \$22.72   | Payee address; City; State; Zip Code  345 Park Ave   |
|   | San Jose, CA 95110   |
| PURPOSE<br>OF<br>EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Software                   |
| Complete ONLY if direct expenditure to benefit C/C          | Candidate/Officeholder name Office sought Office held OH   |
|   |  |

### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/Contract Labor

|   | Candidate/Officeholder/Politica<br>Credit Card Payment     | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.   |
|---|--|---|
| 1 | Total pages Schedule F1:                                   | 2 FILER NAME 3 Filer ID (Ethics Commission Filers)  |
|   | Sch: 5/55 Rpt:   | Carranza, Kristian 00087920   |
| 4 | Date   | 5 Payee name  |
|   | 10/14/2024   | Alina Food Mart   |
| 6 | Amount (\$)  | 7 Payee address; City; State; Zip Code  |
|   | \$8.14   | 4151 Pleasanton Rd  |
|   |  |   |
|   |  | San Antonio, TX 78221   |
| 8 | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description  |
|   | OF<br>EXPENDITURE  | Food/Beverage Expense   |
|   |  | Campaign Refreshments   |
|   |  | Campaign Neiresiments   |
| 9 | Complete ONLY if direct                                    | Candidate/Officeholder name Office sought Office held   |
| 9 | Complete ONLY if direct expenditure to benefit C/O         |   |
| _ | <u> </u>   |   |
|   | Date   | Payee name  |
|   | 10/11/2024   | Amazon  |
|   | Amount (\$)  | Payee address; City; State; Zip Code  |
|   | \$9.61   | 440 Terry Ave N   |
|   |  |   |
|   |  | Seattle, WA 98109   |
|   | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description  |
|   | OF<br>EXPENDITURE  | Advertising Expense Check if travel outside of Texas. Complete Schedule T.  |
|   |  | Check if Austin, TX, officeholder living expense  |
|   |  | Address Labels for Correspondence   |
| _ | Complete ONLY if direct                                    | Candidate/Officeholder name Office sought Office held   |
|   | Complete <u>ONLY</u> if direct expenditure to benefit C/O  |   |
| _ | _  |   |
|   | Date   | Payee name  |
|   | 10/02/2024   | Arjon's International Club  |
|   | Amount (\$)  | Payee address; City; State; Zip Code  |
|   | \$1.00   | 8736 Tesoro Dr  |
|   |  |   |
|   |  | San Antonio, TX 78217   |
|   | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description  |
|   | OF<br>EXPENDITURE  | Food/Beverage Expense   |
|   | ZA ZHOHORZ   | Compairs Front  |
|   |  | Campaign Event  |
| _ | Operation ONE V. C. F.                                     | On didn't lot for a series of the series of |
|   | Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held   |
|   |  |   |
|   |  |   |
|   |  |   |

### SCHEDULE F1

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

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

|   | Candidate/Officenoider/Politica<br>Credit Card Payment | The Instruction Guide explains how to complete this form.  |
|---|--|--|
| 1 | Total pages Schedule F1:                               | 2 FILER NAME 3 Filer ID (Ethics Commission Filers)   |
|   | Sch: 6/55 Rpt:   | Carranza, Kristian 00087920  |
| 4 | Date   | 5 Payee name   |
|   | 10/02/2024   | Arjon's International Club   |
| 6 | Amount (\$)  | 7 Payee address; City; State; Zip Code   |
|   | \$43.50  | 8736 Tesoro Dr   |
|   |  |  |
|   |  | San Antonio, TX 78217  |
| 8 | PURPOSE<br>OF  | (a) Category (See Categories listed at the top of this schedule) (b) Description   |
|   | EXPENDITURE  | Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense |
|   |  | Campaign Event   |
|   |  | Campaign = von   |
| 9 | Complete ONLY if direct                                | Candidate/Officeholder name Office sought Office held  |
| ٥ | expenditure to benefit C/O                             |  |
| _ | Date   | Davies warms   |
|   | 10/03/2024   | Payee name  Arian's International Club   |
|   |  | Arjon's International Club   |
|   | Amount (\$)  | Payee address; City; State; Zip Code   |
|   | \$12.00  | 8736 Tesoro Dr   |
|   | !  |  |
|   |  | San Antonio, TX 78217  |
|   | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description   |
|   | OF<br>EXPENDITURE                                      | Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.   |
|   | !  | Campaign Event   |
|   | !  | Sampaign Event   |
| _ | Complete ONLY if direct                                | Candidate/Officeholder name Office sought Office held  |
|   | expenditure to benefit C/O                             |  |
| ┝ | Data   |  |
|   | Date<br>10/20/2024                                     | Payee name B + B Smokehouse  |
|   |  |  |
|   | Amount (\$)  | Payee address; City; State; Zip Code   |
|   | \$56.11  | 2619 Pleasanton Rd   |
|   |  |  |
|   |  | San Antonio, TX 78221  |
|   | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description   |
|   | OF<br>EXPENDITURE                                      | Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.   |
|   |  | Campaign Meal  |
|   |  | Campaigh moa   |
| _ | Complete ONLY if direct                                | Candidate/Officeholder name Office sought Office held  |
|   | expenditure to benefit C/O                             |  |
|   |  |  |
|   |  |  |
|   |  |  |

#### SCHEDULE F1

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

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

|   | Candidate/Officeholder/Politica<br>Credit Card Payment | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.   |
|---|--|---|
| 1 | Total pages Schedule F1:<br>Sch: 7/55 Rpt:             |   |
| Ļ | <u> </u>   | l l   |
| 4 | Date   | 5 Payee name  |
| L | 10/16/2024   | Berlin Rosen LLC  |
| 6 | Amount (\$)<br>\$7,575.00                              | 7 Payee address; City; State; Zip Code 15 Maiden Ln   |
| L |  | New York, NY 10038  |
| 8 | PURPOSE<br>OF  | (a) Category (See Categories listed at the top of this schedule)  (b) Description   |
|   | EXPENDITURE  | Advertising Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Video Production   |
| 9 | Complete ONLY if direct expenditure to benefit C/O     | Candidate/Officeholder name Office sought Office held   |
|   | Date   | Payee name  |
|   | 09/27/2024   | Bill Miller   |
|   | Amount (\$)<br>\$17.43                                 | Payee address; City; State; Zip Code 620 Division Ave   |
|   |  | San Antonio, TX 78214   |
|   | PURPOSE<br>OF<br>EXPENDITURE                           | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Meal         |
|   | Complete ONLY if direct expenditure to benefit C/O     | Candidate/Officeholder name Office sought Office held   |
|   | Date   | Payee name  |
|   | 10/25/2024   | Black Rock Coffee   |
|   | Amount (\$)<br>\$6.12                                  | Payee address; City; State; Zip Code<br>13980 Nacogdoches   |
|   |  | San Antonio, TX 78217   |
|   | PURPOSE<br>OF<br>EXPENDITURE                           | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Refreshments |
|   | Complete ONLY if direct expenditure to benefit C/O     | Candidate/Officeholder name Office sought Office held   |
|   |  |   |

### SCHEDULE F1

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

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

|   | Candidate/Officeholder/Politica<br>Credit Card Payment | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form. |
|---|--|---|
| 1 | Total pages Schedule F1:                               | 2 FILER NAME 3 Filer ID (Ethics Commission Filers)  |
|   | Sch: 8/55 Rpt:   | Carranza, Kristian 00087920   |
| 4 | Date   | 5 Payee name  |
|   | 10/07/2024   | Blue Scout, LLC   |
| 6 | Amount (\$)  | 7 Payee address; City; State; Zip Code  |
|   | \$1,000.00   | 2505 Royal Birkdale   |
|   |  |   |
|   |  | Plano, TX 75025   |
| 8 | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description  |
|   | OF<br>EXPENDITURE                                      | Solicitation/Fundraising Expense  |
|   |  | Check if Austin, TX, officeholder living expense  Email Fundraising/Consulting  |
|   |  | Email Fundraising/Consulting  |
| 9 | Complete ONLY if direct                                | Candidate/Officeholder name Office sought Office held   |
| 9 | expenditure to benefit C/O                             |   |
| _ | Data   |   |
|   | Date   | Payee name  |
|   | 10/08/2024   | Blue Scout, LLC   |
|   | Amount (\$)  | Payee address; City; State; Zip Code  |
|   | \$1,500.00   | 2505 Royal Birkdale   |
|   |  |   |
|   |  | Plano, TX 75025   |
|   | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description  |
|   | OF<br>EXPENDITURE                                      | Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.   |
|   |  | Check if Austin, TX, officeholder living expense  Email Fundraising/Consulting  |
|   |  | Email Fundraising/Consulting  |
| _ | Complete ONLY if direct                                | Candidate/Officeholder name Office sought Office held   |
|   | expenditure to benefit C/O                             |   |
| _ | Data   | Device same   |
|   | Date<br>10/15/2024                                     | Payee name<br>Bowles, Cole  |
|   |  |   |
|   | Amount (\$)  | Payee address; City; State; Zip Code  |
|   | \$360.00   | 5881 East River Rd  |
|   |  |   |
|   |  | Tucson, AZ 85750  |
|   | PURPOSE<br>OF  | (a) Category (See Categories listed at the top of this schedule) (b) Description  |
|   | EXPENDITURE  | Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.   |
|   |  | Check if Austin, TX, officeholder living expense Field Payroll  |
|   |  | i icia i ayioii   |
| _ | Complete ONLY if direct                                | Candidate/Officeholder name Office sought Office held   |
|   | expenditure to benefit C/O                             |   |
|   |  |   |
|   |  |   |
|   |  |   |

### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

| Candidate/Officeholder/Political Control Cardit Card Payment | Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above  The Instruction Guide explains how to complete this form.  | <del>2</del> ) |
|--|---|----------------|
| 1 Total pages Schedule F1: 2                                 | 2 FILER NAME 3 Filer ID (Ethics Commission  | Filers)        |
| Sch: 9/55 Rpt:   | Carranza, Kristian 00087920   |                |
| 4 Date 5   | 5 Payee name  |                |
| 10/17/2024   | Burmester, Kieran   |                |
| 6 Amount (\$)  | 7 Payee address; City; State; Zip Code 122 Roy Smith #2237  San Antonio, TX 78215   |                |
| 8 PURPOSE (a   | (a) Category (See Categories listed at the top of this schedule) (b) Description  |                |
| OF<br>EXPENDITURE  | Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Field Payroll  |                |
| Complete ONLY if direct<br>expenditure to benefit C/OH       | Candidate/Officeholder name Office sought Office held   |                |
| Date   | Payee name  |                |
| 10/25/2024   | Burmester, Kieran   |                |
| Amount (\$)<br>\$435.85                                      | Payee address; City; State; Zip Code<br>122 Roy Smith #2237   |                |
|  | San Antonio, TX 78215   |                |
| PURPOSE<br>OF<br>EXPENDITURE                                 | (a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Field Payroll |                |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name Office sought Office held   |                |
| Date   | Payee name  |                |
| 09/30/2024   | Chevron   |                |
| Amount (\$)<br>\$15.59                                       | Payee address; City; State; Zip Code<br>8107 S Flores   |                |
|  | San Antonio, TX 78221   |                |
| PURPOSE<br>OF<br>EXPENDITURE                                 | (a) Category (See Categories listed at the top of this schedule)  Travel In District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Transportation/Gas       |                |
| Complete ONLY if direct expenditure to benefit C/OH          | Candidate/Officeholder name Office sought Office held   |                |
|  |   |                |

### SCHEDULE F1

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

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

|            | Candidate/Officeholder/Politica<br>Credit Card Payment | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form. |
|------------|--|---|
| 1          | Total pages Schedule F1:                               | 2 FILER NAME 3 Filer ID (Ethics Commission Filers)  |
|            | Sch: 10/55 Rpt:  | Carranza, Kristian 00087920   |
| 4          | Date   | 5 Payee name  |
|            | 10/02/2024   | Chevron   |
| 6          | Amount (\$)  | 7 Payee address; City; State; Zip Code  |
|            | \$37.25  | 1710 Austin Hwy   |
|            |  |   |
|            |  | San Antonio, TX 78218   |
| 8          | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description  |
|            | OF<br>EXPENDITURE                                      | Travel In District Check if travel outside of Texas. Complete Schedule T.   |
|            |  | Check if Austin, TX, officeholder living expense  |
|            |  | Transportation/Gas  |
| 9          | Complete ONLY if direct                                | Candidate/Officeholder name Office sought Office held   |
| ľ          | Complete ONLY if direct expenditure to benefit C/OI    |   |
| ┡          | ·<br>  |   |
|            | Date   | Payee name  |
|            | 10/08/2024   | Chevron   |
|            | Amount (\$)  | Payee address; City; State; Zip Code  |
|            | \$18.21  | 8107 S Flores   |
|            |  |   |
|            |  | San Antonio, TX 78221   |
|            | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description  |
|            | OF<br>EXPENDITURE                                      | Travel In District Check if travel outside of Texas. Complete Schedule T.   |
|            |  | Check if Austin, TX, officeholder living expense  |
|            |  | Transportation/Gas  |
| L          | Complete ONLY if direct                                | Candidate/Officeholder name Office sought Office held   |
|            | Complete ONLY if direct expenditure to benefit C/OI    |   |
| ┡          |  |   |
|            | Date   | Payee name  |
|            | 10/09/2024   | Chevron   |
|            | Amount (\$)  | Payee address; City; State; Zip Code  |
|            | \$17.38  | 8107 S Flores   |
|            |  |   |
|            |  | San Antonio, TX 78221   |
|            | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description  |
|            | OF<br>EXPENDITURE                                      | Travel In District Check if travel outside of Texas. Complete Schedule T.   |
|            | EXI ENDITORE   | Check if Austin, TX, officeholder living expense  |
|            |  | Transportation/Gas  |
| lacksquare | Complete CNUV'S  | Condidate/Officeholder name   |
| I          | Complete ONLY if direct expenditure to benefit C/OI    | Candidate/Officeholder name Office sought Office held   |
| L          |  |   |
|            |  |   |
| L          |  |   |

## SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

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

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

|   | Credit Card Payment                                 | The Instruction Guide explains how to com  | nple | te this form.  |
|---|---|--|------|--|
| 1 | Total pages Schedule F1:<br>Sch: 11/55 Rpt:         | FILER NAME     Carranza, Kristian  |      | 3 Filer ID (Ethics Commission Filers) 00087920   |
| 4 | Date<br>10/12/2024                                  | 5 Payee name<br>Chevron  |      | ·  |
| 6 | Amount (\$)<br>\$7.07                               | 7 Payee address; City; State; Zip Cod<br>8107 S Flores<br>San Antonio, TX 78221      | le   |  |
| 8 | PURPOSE<br>OF<br>EXPENDITURE                        |  |      | Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign Refreshments |
| 9 | Complete ONLY if direct expenditure to benefit C/Ol | Candidate/Officeholder name Office soug  | ht   | Office held  |
|   | Date<br>10/12/2024                                  | Payee name<br>Chevron  |      |  |
|   | Amount (\$)<br>\$25.99                              | Payee address; City; State; Zip Cod<br>8107 S Flores<br>San Antonio, TX 78221        | le   |  |
|   | PURPOSE<br>OF<br>EXPENDITURE                        | (a) Category (See Categories listed at the top of this schedule)  Travel In District |      | Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Transportation/Gas    |
|   | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office soug  | ht   | Office held  |
|   | Date<br>10/16/2024                                  | Payee name<br>Chevron  |      |  |
|   | Amount (\$)<br>\$39.82                              | Payee address; City; State; Zip Cod<br>8107 S Flores                                 | le   |  |
|   |   | San Antonio, TX 78221  |      |  |
|   | PURPOSE<br>OF<br>EXPENDITURE                        | (a) Category (See Categories listed at the top of this schedule)  Travel In District |      | Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation/Gas       |
|   | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office soug  | ht   | Office held  |
|   |   |  |      |  |

### SCHEDULE F1

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

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

|   | Credit Card Payment        |     | The Instruction Guide explains how to c                      | omple | elete this form.   |
|---|----------------------------|-----|--|-------|--|
| 1 | Total pages Schedule F1:   | 2   | FILER NAME   |       | 3 Filer ID (Ethics Commission Filers)  |
|   | Sch: 12/55 Rpt:            |     | Carranza, Kristian   |       | 00087920   |
| 4 | Date                       | 5   | Payee name   |       |  |
|   | 10/16/2024                 |     | Chevron  |       |  |
| 6 | Amount (\$)                | 1   | Payee address; City; State; Zip C                            | ode   |  |
|   | \$6.69                     |     | 8107 S Flores  |       |  |
|   |                            |     |  |       |  |
|   |                            |     | San Antonio, TX 78221  | _     |  |
| 8 | PURPOSE<br>OF              |     | Category (See Categories listed at the top of this schedule) | (b)   | ) Description  |
|   | EXPENDITURE                |     | Food/Beverage Expense  |       | Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense |
|   |                            |     |  |       | Campaign Refreshments  |
|   |                            |     |  |       |  |
| 9 | Complete ONLY if direct    |     | Candidate/Officeholder name Office so                        | ught  | t Office held  |
| L | expenditure to benefit C/O | H   |  |       |  |
|   | Date                       |     | Payee name   |       |  |
|   | 10/24/2024                 |     | Chevron  |       |  |
|   | Amount (\$)                |     | Payee address; City; State; Zip C                            | ode   |  |
|   | \$17.65                    |     | 3100 Pat Booker Rd   |       |  |
|   |                            |     |  |       |  |
|   |                            |     | Universal City, TX 78148                                     |       |  |
|   | PURPOSE<br>OF              | (a) | Category (See Categories listed at the top of this schedule) | (b)   | ) Description  |
|   | EXPENDITURE                |     | Travel In District   |       | Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense |
|   |                            |     |  |       | Transportation/Gas   |
|   |                            |     |  |       | ·  |
|   | Complete ONLY if direct    |     | Candidate/Officeholder name Office so                        | ught  | t Office held  |
|   | expenditure to benefit C/O | Н   |  |       |  |
|   | Date                       |     | Payee name   |       |  |
|   | 10/15/2024                 |     | Circle K   |       |  |
|   | Amount (\$)                |     | Payee address; City; State; Zip C                            | ode   |  |
|   | \$8.26                     |     | 15010 Judson Rd  |       |  |
|   |                            |     |  |       |  |
|   |                            |     | San Antonio, TX 78247  |       |  |
|   | PURPOSE                    | (a) | Category (See Categories listed at the top of this schedule) | (b)   | ) Description  |
|   | OF<br>EXPENDITURE          |     | Food/Beverage Expense  |       | Check if travel outside of Texas. Complete Schedule T.   |
|   |                            |     |  |       | Check if Austin, TX, officeholder living expense  Campaign Refreshments                                  |
|   |                            |     |  |       |  |
|   | Complete ONLY if direct    |     | Candidate/Officeholder name Office so                        | ught  | t Office held  |
|   | expenditure to benefit C/O | Н   |  | -     |  |
|   |                            |     |  |       |  |
|   |                            |     |  |       |  |
|   |                            |     |  |       |  |

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

| Contributions/ Dor<br>Candidate/Offic<br>Credit Card Paym | ceholder/Politica | I Committee Le      | ift/Awards/Memorials Exp<br>egal Services<br>he Instruction Guide | Salaries/V           | Wages | /Contract Labor  |         | ravel Out of Dis<br>OTHER (enter a | strict<br>category not liste | d above)          |
|---|-------------------|---------------------|---|----------------------|-------|------------------|---------|------------------------------------|------------------------------|-------------------|
| 1 Total pages Sc  | hadula E1:        | 2 FILER NAME        |   | -                    |       |                  | 3 F     | iler ID                            | (Ethics Comr                 | nission Filers)   |
|   |                   |                     | ction   |                      |       |                  |         |                                    | (Eulios Collii               | 1110010111111010) |
| Sch: 13/5!  | o Khr.            | Carranza, Kri       | SudH  |                      |       |                  |         | 00087920                           |                              |                   |
| 4 Date  |                   | <b>5</b> Payee name |   |                      |       |                  |         |                                    |                              |                   |
| 10/24/2024  |                   | Circle K            |   |                      |       |                  |         |                                    |                              |                   |
| 6 Amount (\$)   |                   | 7 Payee address     | ; City;   | State; Zip Co        | ode   |                  |         |                                    |                              |                   |
| .,  | \$16.04           | 15010 Judsoi        |   | , ,                  |       |                  |         |                                    |                              |                   |
|   | <b>∓</b> 2.07     |                     |   |                      |       |                  |         |                                    |                              |                   |
|   |                   |                     | TV 7004-  |                      |       |                  |         |                                    |                              |                   |
|   |                   | San Antonio,        | 1X /8247  |                      |       |                  |         |                                    |                              |                   |
| 8 PURPOSE   |                   | (a) Category (See   | Categories listed at the to                                       | pp of this schedule) | (b)   | Description      |         |                                    |                              |                   |
| OF<br>EXPENDITUR  | 2F                | Food/Beverag        |   |                      |       |                  |         |                                    | plete Schedule T             |                   |
| LAFENDITUE  | \ <b>L</b>        |                     |   |                      |       | Check if Austin, |         |                                    | j expense                    |                   |
|   |                   |                     |   |                      |       | Campaign Re      | efres   | hments                             |                              |                   |
|   |                   |                     |   |                      |       |                  |         |                                    |                              |                   |
| 9 Complete ONL  |                   | Candidate/Office    | holder name   | Office sou           | ıght  |                  |         | Office he                          | eld                          |                   |
| expenditure to  | benefit C/O       | 4                   |   |                      |       |                  |         |                                    |                              |                   |
| Date  |                   | Payee name          |   |                      |       |                  |         |                                    |                              |                   |
| 10/25/2024  |                   | Circle K            |   |                      |       |                  |         |                                    |                              |                   |
|   |                   |                     |   |                      |       |                  |         |                                    |                              |                   |
| Amount (\$)   |                   | Payee address       | -   | State; Zip Co        | ode   |                  |         |                                    |                              |                   |
|   | \$2.48            | 15010 Judsoi        | n Rd  |                      |       |                  |         |                                    |                              |                   |
|   |                   |                     |   |                      |       |                  |         |                                    |                              |                   |
|   |                   | San Antonio,        | TX 78247  |                      |       |                  |         |                                    |                              |                   |
| PURPOSE   |                   | (a) Category (See   | Categories listed at the to                                       | pp of this schedule) | (b)   | Description      |         |                                    |                              |                   |
| OF<br>EXPENDITUR  | RE                | Food/Bevera         | ge Expense  |                      |       | <b></b>          |         |                                    | plete Schedule T.            |                   |
|   | •                 |                     |   |                      |       | Check if Austin, |         |                                    | j expense                    |                   |
|   |                   |                     |   |                      |       | Campaign Re      | erres   | riments                            |                              |                   |
|   |                   |                     |   |                      |       |                  |         |                                    |                              |                   |
| Complete ONL  |                   | Candidate/Office    | holder name   | Office sou           | ught  |                  |         | Office he                          | eld                          |                   |
| expenditure to  | nerielli C/Ol     | 7                   |   |                      |       |                  |         |                                    |                              |                   |
| Date  |                   | Payee name          |   |                      |       |                  |         |                                    |                              |                   |
| 10/26/2024  |                   | Circle K            |   |                      |       |                  |         |                                    |                              |                   |
|   |                   |                     | · City  | State: Zip Co        | nd c  |                  |         |                                    |                              |                   |
| Amount (\$)   | <b>#4.00</b>      | Payee address       |   | State; ZIP CC        | Jue   |                  |         |                                    |                              |                   |
|   | \$4.29            | 15010 Judsoi        | ı Ka  |                      |       |                  |         |                                    |                              |                   |
|   |                   |                     |   |                      |       |                  |         |                                    |                              |                   |
|   |                   | San Antonio,        | TX 78247  |                      |       |                  |         |                                    |                              |                   |
| PURPOSE   |                   | (a) Category (See   | Categories listed at the to                                       | op of this schedule) | (b)   | Description      |         |                                    |                              |                   |
| OF  | ·-                | Food/Beverage       |   |                      |       |                  | outside | of Texas. Com                      | plete Schedule T.            |                   |
| EXPENDITUR  | (E                |                     |   |                      |       | Check if Austin, | TX, of  | ficeholder living                  | j expense                    |                   |
|   |                   |                     |   |                      |       | Campaign Re      | efres   | hments                             |                              |                   |
|   |                   |                     |   |                      |       |                  |         |                                    |                              |                   |
| Complete ONL  | Y if direct       | Candidate/Office    | holder name   | Office sou           | ught  |                  |         | Office he                          | eld                          |                   |
| expenditure to  |                   |                     |   |                      | -     |                  |         |                                    |                              |                   |
|   |                   |                     |   |                      |       |                  |         |                                    |                              |                   |
|   |                   |                     |   |                      |       |                  |         |                                    |                              |                   |
|   |                   |                     |   |                      |       |                  |         |                                    |                              |                   |

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

|   | Credit Card Payment         | The Instruction Guide explains how to co                         | mple         | ete this form.   |
|---|-----------------------------|--|--------------|--|
| 1 | Total pages Schedule F1:    | 2 FILER NAME   |              | 3 Filer ID (Ethics Commission Filers)  |
|   | Sch: 14/55 Rpt:             | Carranza, Kristian   |              | 00087920   |
| 4 | Date                        | 5 Payee name   |              |  |
|   | 10/26/2024                  | Circle K   |              |  |
| 6 | Amount (\$)                 | 7 Payee address; City; State; Zip Co                             | ode          |  |
|   | \$12.25                     | 15010 Judson Rd  |              |  |
|   |                             | 0 4 4 5 74 700 47  |              |  |
|   |                             | San Antonio, TX 78247  |              |  |
| 8 | PURPOSE<br>OF               | (a) Category (See Categories listed at the top of this schedule) | (b)          | Description Check if travel outside of Texas. Complete Schedule T.                                       |
|   | EXPENDITURE                 | Food/Beverage Expense  |              | Check if Austin, TX, officeholder living expense   |
|   |                             |  |              | Campaign Refreshments  |
|   |                             |  |              |  |
| 9 | Complete ONLY if direct     | Candidate/Officeholder name Office sou                           | ight         | Office held  |
|   | expenditure to benefit C/Ol | 1  |              |  |
|   | Date                        | Payee name   |              |  |
|   | 10/26/2024                  | Circle K   |              |  |
|   | Amount (\$)                 | Payee address; City; State; Zip Co                               | ode          |  |
|   | \$8.22                      | 15010 Judson Rd  |              |  |
|   |                             |  |              |  |
|   |                             | San Antonio, TX 78247  |              |  |
|   | PURPOSE                     | (a) Category (See Categories listed at the top of this schedule) | (b)          | Description  |
|   | OF<br>EXPENDITURE           | Food/Beverage Expense  |              | Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense |
|   |                             |  |              | Campaign Refreshments  |
|   |                             |  |              | J  |
|   | Complete ONLY if direct     | Candidate/Officeholder name Office sou                           | ı <u> </u>   | Office held  |
|   | expenditure to benefit C/O  | 1  |              |  |
|   | Date                        | Payee name   |              |  |
|   | 10/01/2024                  | Conexion Political   |              |  |
|   | Amount (\$)                 | Payee address; City; State; Zip Co                               | ode          |  |
|   | \$50,000.00                 | 209 Peninsula Dr   |              |  |
|   |                             |  |              |  |
|   |                             | Moneta, VA 24121   |              |  |
|   | PURPOSE                     | (a) Category (See Categories listed at the top of this schedule) | (b)          | Description  |
|   | OF<br>EXPENDITURE           | Advertising Expense  |              | Check if travel outside of Texas. Complete Schedule T.   |
|   | EXI ENDITORE                |  |              | Check if Austin, TX, officeholder living expense  Digital Advertising                                    |
|   |                             |  |              | Digital Auvertioning   |
|   | Complete ONLY if direct     | Candidate/Officeholder name Office sou                           | laht<br>Iaht | Office held  |
|   | expenditure to benefit C/Ol |  | .g. it       | Office Hold  |
|   |                             |  |              |  |
|   |                             |  |              |  |
|   |                             |  |              |  |

### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commit

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

|   | Candidate/Officeholder/Politica                     | The Instruction Guide explains how to complete this form.                        | OTHER (enter a category not listed above)                        |
|---|---|--|--|
| 1 | Total pages Schedule F1:                            | 2 FILER NAME 3   | Filer ID (Ethics Commission Filers)                              |
|   | Sch: 15/55 Rpt:                                     | Carranza, Kristian   | 00087920   |
| 4 | Date  | 5 Payee name   |  |
|   | 10/05/2024  | Conexion Political   |  |
| 6 | Amount (\$)   | 7 Payee address; City; State; Zip Code   |  |
|   | \$50,000.00   | 209 Peninsula Dr   |  |
|   |   |  |  |
|   |   | Moneta, VA 24121   |  |
| 8 | PURPOSE   | (a) Category (See Categories listed at the top of this schedule) (b) Description |  |
|   | OF<br>EXPENDITURE                                   | 7 tavertising Expense  | le of Texas. Complete Schedule T.<br>officeholder living expense |
|   |   | Digital Advertisin   |  |
|   |   |  |  |
| 9 | Complete ONLY if direct                             | Candidate/Officeholder name Office sought  | Office held  |
|   | expenditure to benefit C/O                          | DH   |  |
|   | Date  | Payee name   |  |
|   | 10/08/2024  | Conexion Political   |  |
|   | Amount (\$)   | Payee address; City; State; Zip Code   |  |
|   | \$18,435.60   |  |  |
|   |   |  |  |
|   |   | Moneta, VA 24121   |  |
|   | PURPOSE   | (a) Category (See Categories listed at the top of this schedule) (b) Description |  |
|   | OF<br>EXPENDITURE                                   | Advertising Expense  | le of Texas. Complete Schedule T.                                |
|   | EXI ENDITORE  |  | officeholder living expense                                      |
|   |   | Digital Advertisin   | g  |
|   | Complete ONLY if direct                             | Candidate/Officeholder name Office sought  | Office held  |
|   | expenditure to benefit C/O                          | · · · · · · · · · · · · · · · · · · ·  | Sinde Held   |
|   | Date  | Payee name   |  |
|   | 10/10/2024  | Conexion Political   |  |
|   | Amount (\$)   | Payee address; City; State; Zip Code   |  |
|   | \$50,000.00   |  |  |
|   | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,             |  |  |
|   |   | Moneta, VA 24121   |  |
|   | PURPOSE   | (a) Category (See Categories listed at the top of this schedule) (b) Description |  |
|   | OF  |  | le of Texas. Complete Schedule T.                                |
|   | EXPENDITURE   | Check if Austin, TX,   | officeholder living expense                                      |
|   |   | Digital Advertisin   | g  |
|   |   |  |  |
|   | Complete ONLY if direct expenditure to benefit C/Ol | Candidate/Officeholder name Office sought DH                                     | Office held  |
|   |   |  |  |
|   |   |  |  |
|   |   |  |  |

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

|   | Credit Card Payment                                 | The Instruction Guide explains how to complete this form.                        |  |
|---|---|--|--|
| 1 | Total pages Schedule F1:                            | 2 FILER NAME   | 3 Filer ID (Ethics Commission Filers)  |
|   | Sch: 16/55 Rpt:                                     | Carranza, Kristian   | 00087920   |
| 4 | Date  | 5 Payee name   | 1  |
|   | 10/18/2024  | Conexion Political   |  |
| 6 | Amount (\$)   | 7 Payee address; City; State; Zip Code   |  |
|   | \$50,000.00   | 209 Peninsula Dr   |  |
|   |   |  |  |
|   |   | Moneta, VA 24121   |  |
| 8 | PURPOSE   | (a) Category (See Categories listed at the top of this schedule) (b) Description |  |
|   | OF  |  | el outside of Texas. Complete Schedule T.  |
|   | EXPENDITURE   | Check if Aust  | in, TX, officeholder living expense  |
|   |   | Digital Adve   | rtising  |
| Ļ | Commists ONII V if diseast                          | Constitute (Office healder no rec  | Office hold  |
| 9 | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought  | Office held  |
| L |   |  |  |
|   | Date  | Payee name   |  |
|   | 10/18/2024  | Conexion Political   |  |
|   | Amount (\$)   | Payee address; City; State; Zip Code   |  |
|   | \$15,000.00   | 209 Peninsula Dr   |  |
|   |   |  |  |
|   |   | Moneta, VA 24121   |  |
|   | PURPOSE<br>OF                                       | (a) Category (See Categories listed at the top of this schedule) (b) Description |  |
|   | EXPENDITURE   |  | el outside of Texas. Complete Schedule T.<br>in, TX, officeholder living expense |
|   |   | Digital Adve   |  |
|   |   |  | S  |
| Г | Complete ONLY if direct                             | Candidate/Officeholder name Office sought  | Office held  |
|   | expenditure to benefit C/OI                         | 1  |  |
|   | Date  | Payee name   |  |
|   | 10/25/2024  | Conexion Political   |  |
|   | Amount (\$)   | Payee address; City; State; Zip Code   |  |
|   | \$105,000.00  | 209 Peninsula Dr   |  |
|   |   |  |  |
|   |   | Moneta, VA 24121   |  |
|   | PURPOSE   | (a) Category (See Categories listed at the top of this schedule) (b) Description |  |
|   | OF  |  | el outside of Texas. Complete Schedule T.  |
|   | EXPENDITURE   | Check if Aust  | in, TX, officeholder living expense  |
|   |   | Digital Adve   | rtising  |
|   | Occasilete ONUNCE II                                | On this to 10 ff a shall as a same   | Office hald  |
|   | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought  | Office held  |
|   | •   |  |  |
|   |   |  |  |
|   |   |  |  |

### SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

|   | Credit Card Payment        | The Instruction Guide explains how to cor                        | -       | , <u>, , , , , , , , , , , , , , , , , , </u>  |     |
|---|----------------------------|--|---------|--|-----|
| 1 | Total pages Schedule F1:   | · · · · · · · · · · · · · · · · · · ·                            | •       | 3 Filer ID (Ethics Commission File   | rs) |
|   | Sch: 17/55 Rpt:            | Carranza, Kristian   |         | 00087920   | ,   |
| 4 | Date                       | 5 Payee name   |         | •  |     |
|   | 10/22/2024                 | Copeland, Elliot   |         |  |     |
| 6 | Amount (\$)                | 7 Payee address; City; State; Zip Coo                            | de      |  |     |
|   | \$153.50                   | 3730 Hunters Trail   |         |  |     |
|   |                            |  |         |  |     |
|   |                            | San Antonio, TX 78230  |         |  |     |
| 8 | PURPOSE                    | (a) Category (See Categories listed at the top of this schedule) | (b) Des | scription  |     |
|   | OF<br>EXPENDITURE          | Salaries/Wages/Contract Labor                                    |         | Check if travel outside of Texas. Complete Schedule T.   |     |
|   |                            |  |         | Check if Austin, TX, officeholder living expense   |     |
|   |                            |  | rie     | iu Fayioli   |     |
| _ | Complete ONLY if direct    | Candidate/Officeholder name Office sou                           | aht     | Office held  |     |
| 9 | expenditure to benefit C/O |  | grit    | Office field   |     |
|   |                            |  |         |  |     |
|   | Date                       | Payee name   |         |  |     |
|   | 09/28/2024                 | CreditHuman  |         |  |     |
|   | Amount (\$)                | Payee address; City; State; Zip Co                               | de      |  |     |
|   | \$12.00                    | PO Box 1356  |         |  |     |
|   |                            |  |         |  |     |
|   |                            | San Antonio, TX 78295  |         |  |     |
|   | PURPOSE                    | (a) Category (See Categories listed at the top of this schedule) |         | scription  |     |
|   | OF<br>EXPENDITURE          | Accounting/Banking   |         | Check if travel outside of Texas. Complete Schedule T.   |     |
|   |                            |  |         | Check if Austin, TX, officeholder living expense  Nk Fee   |     |
|   |                            |  | Bai     |  |     |
| _ | Complete ONLY if direct    | Candidate/Officeholder name Office sou                           | aht     | Office held  |     |
|   | expenditure to benefit C/O | •  | 9110    | Since Held   |     |
| _ | Date                       | Davis asses  |         |  |     |
|   | 10/01/2024                 | Payee name<br>CreditHuman  |         |  |     |
|   |                            |  | -1-     |  |     |
|   | Amount (\$)                | Payee address; City; State; Zip Cor<br>PO Box 1356               | ae      |  |     |
|   | \$12.00                    | PO BOX 1350  |         |  |     |
|   |                            |  |         |  |     |
|   |                            | San Antonio, TX 78295  |         |  |     |
|   | PURPOSE<br>OF              |  | (b) Des | ·  |     |
|   | EXPENDITURE                | Accounting/Banking   |         | Check if travel outside of Texas. Complete Schedule T.<br>Check if Austin, TX, officeholder living expense |     |
|   |                            |  |         | nk Fee   |     |
|   |                            |  | _ 3     |  |     |
| - | Complete ONLY if direct    | Candidate/Officeholder name Office sou                           | ght     | Office held  |     |
|   | expenditure to benefit C/O |  | ٠٠٠     | 22330  |     |
|   |                            |  |         |  |     |
|   |                            |  |         |  |     |
|   |                            |  |         |  |     |

### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

|          | Candidate/Officeholder/Politica<br>Credit Card Payment | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form. |
|----------|--|---|
| 1        | Total pages Schedule F1:                               | 2 FILER NAME 3 Filer ID (Ethics Commission Filers)  |
|          | Sch: 18/55 Rpt:  | Carranza, Kristian 00087920   |
| 4        | Date   | 5 Payee name  |
|          | 10/05/2024   | CreditHuman   |
| 6        | Amount (\$)  | 7 Payee address; City; State; Zip Code  |
|          | \$12.00  | PO Box 1356   |
|          |  |   |
|          |  | San Antonio, TX 78295   |
| 8        | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description  |
|          | OF<br>EXPENDITURE                                      | Accounting/Banking Check if travel outside of Texas. Complete Schedule T.   |
|          |  | Check if Austin, TX, officeholder living expense  Bank Fee  |
|          |  | Dank i ee   |
| 9        | Complete ONLY if direct                                | Candidate/Officeholder name Office sought Office held   |
| ľ        | expenditure to benefit C/OI                            |   |
| ⊨        | Data   |   |
|          | Date   | Payee name  |
| L        | 10/05/2024   | CreditHuman   |
|          | Amount (\$)  | Payee address; City; State; Zip Code  |
|          | \$12.00  | PO Box 1356   |
|          |  |   |
|          |  | San Antonio, TX 78295   |
|          | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description  |
|          | OF<br>EXPENDITURE                                      | Accounting/Banking Check if travel outside of Texas. Complete Schedule T.   |
|          |  | Check if Austin, TX, officeholder living expense  Bank Fee  |
|          |  | Dalik Fee   |
| H        | Complete ONLY if direct                                | Candidate/Officeholder name Office sought Office held   |
|          | expenditure to benefit C/OI                            |   |
| ⊨        | Date   |   |
|          | Date   | Payee name  |
|          | 10/08/2024   | CreditHuman   |
|          | Amount (\$)  | Payee address; City; State; Zip Code  |
|          | \$12.00  | PO Box 1356   |
|          |  |   |
|          |  | San Antonio, TX 78295   |
|          | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description  |
|          | OF<br>EXPENDITURE                                      | Accounting/Banking Check if travel outside of Texas. Complete Schedule T.   |
|          |  | Check if Austin, TX, officeholder living expense  Bank Fee  |
|          |  | Dalik Fee   |
| $\vdash$ | Complete ONLY if direct                                | Candidate/Officeholder name Office sought Office held   |
|          | expenditure to benefit C/OI                            |   |
| $\vdash$ |  |   |
|          |  |   |
|          |  |   |

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

|          | Candidate/Officeholder/Politica<br>Credit Card Payment | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form. |
|----------|--|---|
| 1        | Total pages Schedule F1:                               | 2 FILER NAME 3 Filer ID (Ethics Commission Filers)  |
|          | Sch: 19/55 Rpt:  | Carranza, Kristian 00087920   |
| 4        | Date   | 5 Payee name  |
|          | 10/10/2024   | CreditHuman   |
| 6        | Amount (\$)  | 7 Payee address; City; State; Zip Code  |
|          | \$15.00  | PO Box 1356   |
|          |  |   |
|          |  | San Antonio, TX 78295   |
| 8        | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description  |
|          | OF<br>EXPENDITURE                                      | Accounting/Banking Check if travel outside of Texas. Complete Schedule T.   |
|          |  | Check if Austin, TX, officeholder living expense  Bank Fee  |
|          |  | Bunktee   |
| 9        | Complete ONLY if direct                                | Candidate/Officeholder name Office sought Office held   |
|          | expenditure to benefit C/O                             |   |
| $\vdash$ | Data   |   |
|          | Date   | Payee name  |
|          | 10/10/2024   | CreditHuman   |
|          | Amount (\$)  | Payee address; City; State; Zip Code  |
|          | \$15.00  | PO Box 1356   |
|          |  |   |
|          |  | San Antonio, TX 78295   |
|          | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description  |
|          | OF<br>EXPENDITURE                                      | Accounting/Banking Check if travel outside of Texas. Complete Schedule T.   |
|          |  | Check if Austin, TX, officeholder living expense  Bank Fee  |
|          |  | Dalik Fee   |
|          | Complete ONLY if direct                                | Candidate/Officeholder name Office sought Office held   |
|          | expenditure to benefit C/O                             |   |
|          | <b>D</b> .   |   |
|          | Date   | Payee name  |
|          | 10/10/2024   | CreditHuman   |
|          | Amount (\$)  | Payee address; City; State; Zip Code  |
|          | \$15.00  | PO Box 1356   |
|          |  |   |
|          |  | San Antonio, TX 78295   |
|          | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description  |
|          | OF<br>EXPENDITURE                                      | Accounting/Banking Check if travel outside of Texas. Complete Schedule T.   |
|          |  | Check if Austin, TX, officeholder living expense  Bank Fee  |
|          |  | οαιικ Γ <del>εε</del>   |
| $\vdash$ | Complete ONLY if direct                                | Candidate/Officeholder name Office sought Office held   |
|          | expenditure to benefit C/O                             |   |
| _        |  |   |
|          |  |   |
|          |  |   |

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

|   | Contributions/ Donations Made By<br>Candidate/Officeholder/Politica<br>Credit Card Payment |  | ed above)       |
|---|--|--|-----------------|
| 1 | Total pages Schedule F1:   | : 2 FILER NAME 3 Filer ID (Ethics Comr   | mission Filers) |
| Ĺ | Sch: 20/55 Rpt:  | Carranza, Kristian 00087920  |                 |
| 4 | Date   | 5 Payee name   |                 |
|   | 10/10/2024   | CreditHuman  |                 |
| 6 | Amount (\$) \$15.00  | 7 Payee address; City; State; Zip Code PO Box 1356                               |                 |
|   |  |  |                 |
|   |  | San Antonio, TX 78295  |                 |
| 8 | PURPOSE<br>OF  | (a) Category (See Categories listed at the top of this schedule) (b) Description |                 |
|   | EXPENDITURE  | Accounting/Banking Check if travel outside of Texas. Complete Schedule T         | •               |
|   |  | Bank Fee   |                 |
|   |  |  |                 |
| 9 | Complete ONLY if direct expenditure to benefit C/Oh  | Candidate/Officeholder name Office sought Office held OH                         |                 |
| _ | Data   |  |                 |
|   | Date   | Payee name   |                 |
|   | 10/16/2024   | CreditHuman  |                 |
|   | Amount (\$)  | Payee address; City; State; Zip Code   |                 |
|   | \$15.00  | PO Box 1356  |                 |
|   |  | San Antonio, TX 78295  |                 |
|   | PURPOSE<br>OF  | (a) Category (See Categories listed at the top of this schedule) (b) Description |                 |
|   | EXPENDITURE  | Accounting/Banking Check if travel outside of Texas. Complete Schedule T         | •               |
|   |  | Bank Fee   |                 |
|   |  |  |                 |
|   | Complete ONLY if direct expenditure to benefit C/O   | Candidate/Officeholder name Office sought Office held  OH                        |                 |
|   | Date   | Payee name   |                 |
|   | 10/18/2024   | CreditHuman  |                 |
|   | Amount (\$)  | Payee address; City; State; Zip Code   |                 |
|   | \$15.00  | PO Box 1356  |                 |
|   |  | San Antonio, TX 78295  |                 |
|   | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description |                 |
|   | OF   | Accounting/Banking    Check if travel outside of Texas. Complete Schedule T      |                 |
|   | EXPENDITURE  | Check if Austin, TX, officeholder living expense                                 |                 |
|   |  | Bank Fee   |                 |
|   | Complete ONLY if direct  | Candidate/Officeholder name Office sought Office held                            |                 |
|   | expenditure to benefit C/OI  | DH .   |                 |
|   |  |  |                 |
|   |  |  |                 |
|   |  |  |                 |

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

|          | Candidate/Officeholder/Politica<br>Credit Card Payment | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.  |
|----------|--|--|
| 1        | Total pages Schedule F1:                               | 2 FILER NAME 3 Filer ID (Ethics Commission Filers)   |
|          | Sch: 21/55 Rpt:  | Carranza, Kristian 00087920  |
| 4        | Date   | 5 Payee name   |
|          | 10/18/2024   | CreditHuman  |
| 6        | Amount (\$)  | 7 Payee address; City; State; Zip Code   |
|          | \$12.00  | PO Box 1356  |
|          |  |  |
|          |  | San Antonio, TX 78295  |
| 8        | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description   |
|          | OF<br>EXPENDITURE                                      | Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  |
|          |  | Check if Austin, TX, officeholder living expense  Bank Fee   |
|          |  | Dalik Fee  |
| Ļ        | Operation ONLY & Street                                | Open Highest (Office health)   |
| 9        | Complete ONLY if direct expenditure to benefit C/OI    | Candidate/Officeholder name Office sought Office held  |
| ┕        | <u>'</u>   |  |
|          | Date   | Payee name   |
|          | 10/18/2024   | CreditHuman  |
|          | Amount (\$)  | Payee address; City; State; Zip Code   |
|          | \$12.00  | PO Box 1356  |
|          |  |  |
|          |  | San Antonio, TX 78295  |
|          | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description   |
|          | OF<br>EXPENDITURE                                      | Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  |
|          |  | Check if Austin, TX, officeholder living expense  Bank Fee   |
|          |  | Dankie   |
| H        | Complete ONLY if direct                                | Candidate/Officeholder name Office sought Office held  |
|          | expenditure to benefit C/OI                            |  |
| H        |  |  |
|          | Date   | Payee name   |
|          | 10/18/2024   | CreditHuman  |
|          | Amount (\$)  | Payee address; City; State; Zip Code   |
|          | \$12.00  | PO Box 1356  |
|          |  |  |
|          |  | San Antonio, TX 78295  |
|          | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description   |
|          | OF<br>EXPENDITURE                                      | Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  |
|          | 2/11/2/10/12   | Check if Austin, TX, officeholder living expense   |
|          |  | Bank Fee   |
| $\vdash$ | Operation ONE VIII II                                  | Out in the Committee of |
| 1        | Complete ONLY if direct expenditure to benefit C/OI    | Candidate/Officeholder name Office sought Office held  |
| L        |  |  |
|          |  |  |
| L        |  |  |

### SCHEDULE F1

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

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

|   | Credit Card Payment  The Instruction Guide explains how to complete this form. |          |  |        |  |
|---|--|----------|--|--------|--|
| 1 | Total pages Schedule F1:   | 2        | FILER NAME   |        | 3 Filer ID (Ethics Commission Filers)  |
|   | Sch: 22/55 Rpt:  |          | Carranza, Kristian   |        | 00087920   |
| 4 | Date   | 5        | Payee name   |        | •  |
|   | 10/19/2024   |          | CreditHuman  |        |  |
| 6 | Amount (\$)  | 7        | Payee address; City; State; Zip C                            | ode    |  |
|   | \$12.00  |          | PO Box 1356  |        |  |
|   |  |          |  |        |  |
|   |  |          | San Antonio, TX 78295  |        |  |
| 8 | PURPOSE  | (a)      | Category (See Categories listed at the top of this schedule) | (b)    | Description  |
|   | OF<br>EXPENDITURE  |          | Accounting/Banking   |        | Check if travel outside of Texas. Complete Schedule T.   |
|   | EXI ENDITORE   |          |  |        | Check if Austin, TX, officeholder living expense  Bank Fee   |
|   |  |          |  |        | Dalik Fee  |
| 9 | Complete ONLY if direct  | <u> </u> | Candidate/Officeholder name Office so                        | uaht   | Office held  |
| 5 | expenditure to benefit C/OI  |          | Sandidate/Officeriolder flame                                | rugiit | Since field  |
| _ | Date   | Т        | Davies name  |        |  |
|   | 10/25/2024   |          | Payee name<br>CreditHuman                                    |        |  |
|   |  | _        |  | `odo   |  |
|   | Amount (\$) \$12.00  |          | Payee address; City; State; Zip C<br>PO Box 1356             | oue    |  |
|   | \$12.00  |          | PO BOX 1350  |        |  |
|   |  |          | 04   |        |  |
|   |  | L        | San Antonio, TX 78295  |        |  |
|   | PURPOSE<br>OF  | (a)      | Category (See Categories listed at the top of this schedule) | (b)    | Description  |
|   | EXPENDITURE  |          | Accounting/Banking   |        | Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense |
|   |  |          |  |        | Bank Fee   |
|   |  |          |  |        |  |
|   | Complete ONLY if direct  |          | Candidate/Officeholder name Office so                        | ught   | Office held  |
|   | expenditure to benefit C/OI  | Н        |  |        |  |
|   | Date   |          | Payee name   |        |  |
|   | 10/25/2024   |          | CreditHuman  |        |  |
|   | Amount (\$)  | H        | Payee address; City; State; Zip C                            | ode    |  |
|   | \$12.00  |          | PO Box 1356  |        |  |
|   |  |          |  |        |  |
|   |  |          | San Antonio, TX 78295  |        |  |
|   | PURPOSE  | (a)      | Category (See Categories listed at the top of this schedule) | (b)    | Description  |
|   | OF   | ``       | Accounting/Banking   | '      | Check if travel outside of Texas. Complete Schedule T.   |
|   | EXPENDITURE  |          | 5 5  |        | Check if Austin, TX, officeholder living expense   |
|   |  |          |  |        | Bank Fee   |
|   |  |          |  |        |  |
|   | Complete ONLY if direct expenditure to benefit C/OI                            |          | Candidate/Officeholder name Office so                        | ught   | Office held  |
|   | pondition to benefit 0/01  | •        |  |        |  |
|   |  |          |  |        |  |
|   |  |          |  |        |  |

## SCHEDULE F1

Advertising Expense Event Expert
Accounting/Banking Fees
Consulting Expense Food/Bevert
Contributions/ Donations Made By - Gift/Awards,
Candidate/Officeholder/Political Committee Legal Service

Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor

| Credit Card Payment  | The Instruction Guide explains how to co   | mplete this form. |   |           |
|--|--|-------------------|---|-----------|
| 1 Total pages Schedule F1:                                   | 2 FILER NAME   |                   | 3 Filer ID (Ethics Commission   | ı Filers) |
| Sch: 23/55 Rpt:  | Carranza, Kristian   |                   | 00087920  |           |
| 4 Date   | 5 Payee name   |                   | •   |           |
| 10/10/2024   | Don Pedro  |                   |   |           |
| 6 Amount (\$)  | 7 Payee address; City; State; Zip C  | de                |   |           |
| \$20.11  | 1526 SW Military Dr  |                   |   |           |
|  |  |                   |   |           |
|  | San Antonio, TX 78221  |                   |   |           |
| 8 PURPOSE  | (a) Category (See Categories listed at the top of this schedule)                       | (b) Description   |   |           |
| OF<br>EXPENDITURE  | Food/Beverage Expense  |                   | vel outside of Texas. Complete Schedule T.  |           |
| EXPENDITURE  |  |                   | stin, TX, officeholder living expense   |           |
|  |  | Campaign          | Meal  |           |
|  |  |                   |   |           |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/O  | Candidate/Officeholder name Office so H  | ght               | Office held   |           |
|  |  |                   |   |           |
| Date   | Payee name   |                   |   |           |
| 10/24/2024   | E23 Digital  |                   |   |           |
| Amount (\$)  | Payee address; City; State; Zip C  | de                |   |           |
| \$2,000.00   | 490 Lake Park Avenue #16044  |                   |   |           |
|  |  |                   |   |           |
|  | Oakland, CA 94610  |                   |   |           |
| PURPOSE  | (a) Category (See Categories listed at the top of this schedule)                       | (b) Description   |   |           |
| OF<br>EXPENDITURE  | Office Overhead/Rental Expense   |                   | vel outside of Texas. Complete Schedule T.<br>stin, TX, officeholder living expense |           |
|  |  | Web Desig         |   |           |
|  |  | W05 B001g         | , ,   |           |
| Complete ONLY if direct                                      | Candidate/Officeholder name Office so  | ght               | Office held   |           |
| expenditure to benefit C/O                                   |  | o .               |   |           |
| Date   | Payee name   |                   |   |           |
| 10/19/2024   | El Farolito  |                   |   |           |
| Amount (\$)  | Payee address; City; State; Zip C  | de                |   |           |
| \$16.50  | 2409 Commercial Ave  |                   |   |           |
| ,  |  |                   |   |           |
|  | San Antonio, TX 78221  |                   |   |           |
| PURPOSE  |  | (b) Description   |   |           |
| OF   | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense |                   | vel outside of Texas. Complete Schedule T.  |           |
| EXPENDITURE  | 1 Odd/Deverage Expense   | Check if Au       | stin, TX, officeholder living expense   |           |
|  |  | Campaign          | Meal  |           |
|  |  |                   |   |           |
| Complete <u>ONLY</u> if direct<br>expenditure to benefit C/O | Candidate/Officeholder name Office so  | ght               | Office held   |           |
| experientale to belieff C/O                                  |  |                   |   |           |
|  |  |                   |   |           |
|  |  |                   |   |           |

## SCHEDULE F1

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

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

|          | Credit Card Payment                                 | The Instruction Guide explains how to com                        | plete          | this form.   |
|----------|---|--|----------------|--|
| 1        | Total pages Schedule F1:                            | 2 FILER NAME   |                | 3 Filer ID (Ethics Commission Filers)  |
|          | Sch: 24/55 Rpt:                                     | Carranza, Kristian   |                | 00087920   |
| 4        | Date  | 5 Payee name   |                | •  |
|          | 09/30/2024  | Fedex Office   |                |  |
| 6        | Amount (\$)   | 7 Payee address; City; State; Zip Code                           | le             |  |
|          | \$10.00   | 7900 Legacy Drive  |                |  |
|          |   |  |                |  |
|          |   | Plano, TX 75024  |                |  |
| 8        | PURPOSE   |  | <b>b)</b> D    | Description  |
|          | OF  | Printing Expense   | , <sub>Г</sub> | Check if travel outside of Texas. Complete Schedule T.   |
|          | EXPENDITURE   | 3 1,5 5  | Ē              | Check if Austin, TX, officeholder living expense   |
|          |   |  | Р              | Printing Services  |
|          |   |  |                |  |
| 9        | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sough                         | ht             | Office held  |
|          | experientare to benefit Grot                        | •  |                |  |
|          | Date  | Payee name   |                |  |
|          | 10/01/2024  | Fedex Office   |                |  |
|          | Amount (\$)   | Payee address; City; State; Zip Code                             | le             |  |
|          | \$3.64  | 7900 Legacy Drive  |                |  |
| l        |   |  |                |  |
| l        |   | Plano, TX 75024  |                |  |
| H        | PURPOSE   | (a) Category (See Categories listed at the top of this schedule) | <b>(b)</b> D   | Description  |
| l        | OF<br>EXPENDITURE                                   | Printing Expense   |                | Check if travel outside of Texas. Complete Schedule T.   |
| l        | LXI LINDITORE                                       |  | Ē              | Check if Austin, TX, officeholder living expense   |
| l        |   |  | Р              | Printing Services  |
| ┡        | Complete ONLY if direct                             | Candidate/Officeholder name Office sough                         | ht             | Office held  |
|          | Complete ONLY if direct expenditure to benefit C/OI |  | ΠL             | Office field   |
| ⊨        |   |  |                |  |
|          | Date  | Payee name   |                |  |
| L        | 10/16/2024  | Flores C-Store   |                |  |
| l        | Amount (\$)   | Payee address; City; State; Zip Code                             | le             |  |
|          | \$18.65   | 8107 S Flores St   |                |  |
| l        |   |  |                |  |
|          |   | San Antonio, TX 78221  |                |  |
|          | PURPOSE<br>OF                                       | ,  | (b) D          | Description  |
|          | EXPENDITURE   | Food/Beverage Expense  | Ļ              | Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense |
|          |   |  | L              | Crieck in Austrit, 114, billiceribider riving expense Campaign Refreshments                              |
|          |   |  | _              |  |
| $\vdash$ | Complete ONLY if direct                             | Candidate/Officeholder name Office sough                         | ht             | Office held  |
|          | expenditure to benefit C/OI                         |  |                | Silico Hold  |
| -        |   |  |                |  |
|          |   |  |                |  |
|          |   |  |                |  |

## SCHEDULE F1

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

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

|   | Credit Card Payment  | The Instruction Guide explains how to complete this form.                        |  |
|---|--|--|--|
| 1 | Total pages Schedule F1:                                   | 2 FILER NAME   | 3 Filer ID (Ethics Commission Filers)  |
|   | Sch: 25/55 Rpt:  | Carranza, Kristian   | 00087920   |
| 4 | Date   | 5 Payee name   |  |
|   | 09/30/2024   | GMMB   |  |
| 6 | Amount (\$)  | 7 Payee address; City; State; Zip Code   |  |
|   | \$139,628.00   | 3050 K St NW   |  |
|   |  |  |  |
|   |  | Washington, DC 20007   |  |
| 8 | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description |  |
|   | OF<br>EXPENDITURE  | · · · · · · · · · · · · · · · · · · ·  | outside of Texas. Complete Schedule T.                                       |
|   | EXPENDITURE  |  | n, TX, officeholder living expense   |
|   |  | Broadcast A  | д Виу  |
| Ļ | 0 1: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0:                |  | 000  |
| 9 | Complete ONLY if direct expenditure to benefit C/OI        | Candidate/Officeholder name Office sought  | Office held  |
| L | ·  |  |  |
|   | Date   | Payee name   |  |
|   | 10/07/2024   | GMMB   |  |
|   | Amount (\$)  | Payee address; City; State; Zip Code   |  |
|   | \$155,707.00   | 3050 K St NW   |  |
|   |  |  |  |
|   |  | Washington, DC 20007   |  |
|   | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description |  |
|   | OF<br>EXPENDITURE  | Advertising Expense  | outside of Texas. Complete Schedule T.<br>n, TX, officeholder living expense |
|   |  | Broadcast A  |  |
|   |  |  |  |
| _ | Complete ONLY if direct                                    | Candidate/Officeholder name Office sought  | Office held  |
|   | expenditure to benefit C/OI                                |  |  |
| _ | Date   | Payee name   |  |
|   | 10/10/2024   | GMMB   |  |
|   | Amount (\$)  | Payee address; City; State; Zip Code   |  |
|   | \$175,508.00   | 3050 K St NW   |  |
|   | ·  |  |  |
|   |  | Washington, DC 20007   |  |
|   | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description |  |
|   | OF   |  | outside of Texas. Complete Schedule T.                                       |
|   | EXPENDITURE  | Check if Austin  | n, TX, officeholder living expense   |
|   |  | Broadcast A  | d Buy  |
|   |  |  |  |
|   | Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought  | Office held  |
|   | experience to beliefit 6/01                                | •  |  |
|   |  |  |  |
|   |  |  |  |

### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

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

### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor

|   | Credit Card Payment                                 | The Instruction Guide explains how to complete this form.  |                                  |
|---|---|--|----------------------------------|
| 1 | Total pages Schedule F1:                            | 2 FILER NAME 3 Fil   | er ID (Ethics Commission Filers) |
|   | Sch: 27/55 Rpt:                                     | Carranza, Kristian 00  | 0087920                          |
| 4 | Date  | 5 Payee name   |                                  |
|   | 10/01/2024  | Google Domains   |                                  |
| 6 | Amount (\$)   | 7 Payee address; City; State; Zip Code   |                                  |
|   | \$38.38   | 1600 Amphitheatre Parkway  |                                  |
|   |   |  |                                  |
|   |   | Mountain View, CA 94043  |                                  |
| 8 | PURPOSE   | (a) Category (See Categories listed at the top of this schedule) (b) Description   |                                  |
|   | OF<br>EXPENDITURE                                   | Office Overhead/Rental Expense   | of Texas. Complete Schedule T.   |
|   | LXI LINDITORE                                       | Check if Austin, TX, office  |                                  |
|   |   | Domain Name + E  | man                              |
| 9 | Complete ONLY if direct                             | Candidate/Officeholder name Office sought  | Office held                      |
| 9 | Complete ONLY if direct expenditure to benefit C/OI |  | Office field                     |
|   |   | 1  |                                  |
|   | Date  | Payee name   |                                  |
|   | 10/08/2024  | Gregory, Gabrien   |                                  |
|   | Amount (\$)   | Payee address; City; State; Zip Code   |                                  |
|   | \$282.80  | PO Box 700293  |                                  |
|   |   |  |                                  |
|   |   | San Antonio, TX 78270  |                                  |
|   | PURPOSE   | (a) Category (See Categories listed at the top of this schedule) (b) Description   |                                  |
|   | OF<br>EXPENDITURE                                   | Salaries/Wages/Contract Labor Check if travel outside of Check if Austin, TX, office to the contract Labor Check if Austin, TX, office to the contract Labor Check if Austin, TX, office to the contract Labor Check if Austin, TX, office to the contract Labor Check if travel outside to the contract Labor Check if th | of Texas. Complete Schedule T.   |
|   |   | Field Payroll  | certotaer living experise        |
|   |   |  |                                  |
|   | Complete ONLY if direct                             | Candidate/Officeholder name Office sought  | Office held                      |
|   | expenditure to benefit C/OI                         | DH .   |                                  |
|   | Date  | Payee name   |                                  |
|   | 10/16/2024  | Gregory, Gabrien   |                                  |
|   | Amount (\$)   | Payee address; City; State; Zip Code   |                                  |
|   | \$223.10  | PO Box 700293  |                                  |
|   |   |  |                                  |
|   |   | San Antonio, TX 78270  |                                  |
|   | PURPOSE   |  |                                  |
|   | OF  | i i i i i i i i i i i i i i i i i i i  | of Texas. Complete Schedule T.   |
|   | EXPENDITURE   | Check if Austin, TX, office  | ceholder living expense          |
|   |   | Field Payroll  |                                  |
|   |   |  |                                  |
|   | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought  | Office held                      |
|   | experiulture to beliefit C/OI                       | 41   |                                  |
|   |   |  |                                  |
|   |   |  |                                  |

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

|     | Contributions/ Donations Made By<br>Candidate/Officeholder/Politica<br>Credit Card Payment |  |     |
|-----|--|--|-----|
| 1   | Total pages Schedule F1:   | · · · · · · · · · · · · · · · · · · ·  | -   |
| ļ - | Sch: 28/55 Rpt:  | Carranza, Kristian 00087920  |     |
| Ļ   | ·  |  | _   |
| 4   | Date   | 5 Payee name   |     |
|     | 10/26/2024   | Griff's Hamburgers   |     |
| 6   | Amount (\$)  | 7 Payee address; City; State; Zip Code   |     |
|     | \$21.30  | 2418 Pleasanton Rd   |     |
|     |  |  |     |
|     |  | San Antonio, TX 78221  |     |
| Ļ   |  |  | _   |
| 8   | PURPOSE<br>OF  | (a) Category (See Categories listed at the top of this schedule) (b) Description   |     |
|     | EXPENDITURE  | Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense |     |
|     |  | Campaign Meal  |     |
|     |  | Campaign moa   |     |
| _   | Complete ONLY if direct  | Condidate/Officeholder name Office cought  | _   |
| 9   | Complete ONLY if direct expenditure to benefit C/OI  | Candidate/Officeholder name Office sought Office held H  |     |
| L   |  |  | _   |
|     | Date   | Payee name   |     |
|     | 10/10/2024   | HEB  |     |
|     | Amount (\$)  | Payee address; City; State; Zip Code   | _   |
|     | \$2.13   | 735 SW Military  |     |
|     |  |  |     |
|     |  | San Antonio, TX 78221  |     |
|     | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description   | -   |
|     | OF   | Food/Beverage Expense  Check if travel outside of Texas. Complete Schedule T.  |     |
|     | EXPENDITURE  | Check if Austin, TX, officeholder living expense   |     |
|     |  | Campaign Refreshment   |     |
|     |  |  |     |
|     | Complete ONLY if direct  | Candidate/Officeholder name Office sought Office held  | _   |
|     | expenditure to benefit C/OI  |  |     |
| H   | Date   | Davos nama   | =   |
|     | Date<br>10/20/2024   | Payee name HEB   |     |
|     |  |  |     |
|     | Amount (\$)  | Payee address; City; State; Zip Code   |     |
|     | \$86.35  | 735 SW Military  |     |
|     |  |  |     |
|     |  | San Antonio, TX 78221  | _   |
|     | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description   |     |
|     | OF<br>EXPENDITURE  | Food/Beverage Expense  |     |
|     |  | Check if Austin, TX, officeholder living expense   |     |
|     |  | Event Materials  |     |
|     |  |  |     |
|     | Complete ONLY if direct  | Candidate/Officeholder name Office sought Office held  |     |
|     | expenditure to benefit C/O   | п  |     |
|     |  |  |     |
|     |  |  |     |
|     |  |  | - 1 |

### SCHEDULE F1

vertising Expense Event Expense Loan Repayment/Reimbu

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

## SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee 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

|   | Credit Card Payment                                       | The Instruction Guide explains how to complete t  | his form.  |
|---|---|---|--|
| 1 | Total pages Schedule F1:<br>Sch: 30/55 Rpt:               | 2 FILER NAME<br>Carranza, Kristian  | 3 Filer ID (Ethics Commission Filers) 00087920   |
| 4 | Date<br>10/22/2024  | 5 Payee name<br>HEB   |  |
| 6 | Amount (\$)<br>\$50.95                                    | 7 Payee address; City; State; Zip Code<br>735 SW Military<br>San Antonio, TX 78221              |  |
| 8 | PURPOSE<br>OF<br>EXPENDITURE                              | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | Scription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense fice Supplies    |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/O | 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 735 SW Military  San Antonio, TX 78221                     |  |
|   | PURPOSE<br>OF<br>EXPENDITURE                              | Travel In District  | Scription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense ansportation/Gas |
|   | Complete ONLY if direct expenditure to benefit C/O        | 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 735 SW Military  |  |
|   |   | San Antonio, TX 78221   |  |
|   | PURPOSE<br>OF<br>EXPENDITURE                              | Food/Beverage Expense   | Scription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense rent Supplies    |
|   | Complete ONLY if direct expenditure to benefit C/O        | Candidate/Officeholder name Office sought   | Office held  |
|   |   |   |  |

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

|   | Candidate/Officeholder/Politica<br>Credit Card Payment | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form. |
|---|--|---|
| 1 | Total pages Schedule F1:                               | 2 FILER NAME 3 Filer ID (Ethics Commission Filers)  |
|   | Sch: 32/55 Rpt:  | Carranza, Kristian 00087920   |
| 4 | Date   | 5 Payee name  |
|   | 10/08/2024   | Little Taco Factory   |
| 6 | Amount (\$)  | 7 Payee address; City; State; Zip Code  |
|   | \$11.50  | 1510 McCullough   |
|   |  |   |
|   |  | San Antonio, TX 78212   |
| 8 | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description  |
|   | OF<br>EXPENDITURE                                      | Food/Beverage Expense   |
|   |  | Campaign Meal   |
|   |  | Campaign wear   |
| 9 | Complete ONLY if direct                                | Candidate/Officeholder name Office sought Office held   |
| 9 | expenditure to benefit C/O                             | - · · · · · · · · · · · · · · · · · · ·   |
| _ | Data   |   |
|   | Date   | Payee name  |
|   | 10/15/2024   | Locke, Hudson   |
|   | Amount (\$)  | Payee address; City; State; Zip Code  |
|   | \$96.00  | 13602 Bridgeview  |
|   |  |   |
|   |  | San Antonio, TX 78247   |
|   | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description  |
|   | OF<br>EXPENDITURE                                      | Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.   |
|   |  | Check if Austin, TX, officeholder living expense Field Payroll  |
|   |  | ricia rayion  |
| _ | Complete ONLY if direct                                | Candidate/Officeholder name Office sought Office held   |
|   | expenditure to benefit C/O                             |   |
| - | Date   | Payee name  |
|   | 10/11/2024   | Payee name Lyft Ride  |
|   |  | -   |
|   | Amount (\$)  | Payee address; City; State; Zip Code  |
|   | \$13.74  | 185 Berry St Ste 50   |
|   |  |   |
|   |  | San Francisco, CA 94107   |
|   | PURPOSE<br>OF  | (a) Category (See Categories listed at the top of this schedule) (b) Description  |
|   | EXPENDITURE  | Travel In District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense                                   |
|   |  | Transportation  |
|   |  | Transportation  |
| - | Complete ONLY if direct                                | Candidate/Officeholder name Office sought Office held   |
|   | expenditure to benefit C/O                             |   |
|   |  |   |
|   |  |   |
|   |  |   |

### SCHEDULE F1

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

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

| 10/12/2024   Lyft Ride   | Sch: 33/55 Rpt: Carranza, Kristian 00087920  4 Date 10/12/2024 5 Payee name Lyft Ride  6 Amount (\$) 7 Payee address; City; State; Zip Code 185 Berry St Ste 50 San Francisco, CA 94107  8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Candidate/Officeholder name Office sought Office holder living expense Transportation  9 Complete ONLY if direct expenditure to benefit C/OH  Date 10/19/2024 Lyft Ride  Amount (\$) Payee name Lyft Ride  Amount (\$) Payee address; City; State; Zip Code  \$18.85 Serry St Ste 50  San Francisco, CA 94107  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) (b) Description Office holder living expense Transportation  Date 10/19/2024 Lyft Ride  Amount (\$) Payee address; City; State; Zip Code  \$18.85 San Francisco, CA 94107  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) (b) Description Check if Iravel outside of Texas. Complete Schedule T. Check if Iravel outside of Texas. Complete Schedule T. Check if Iravel outside of Texas. Complete Schedule T. Check if Iravel outside of Texas. Complete Schedule T. Check if Iravel outside of Texas. Complete Schedule T. Check if Iravel Outside of Texas. Complete Schedule T. Check if Iravel Outside of Texas. Complete Schedule T. Check if Iravel Outside of Texas. Complete Schedule T. Check if Iravel Outside of Texas. Complete Schedule T. Check if Iravel Outside of Texas. Complete Schedule T. Check if Iravel Outside of Texas. Complete Schedule T. Check if Iravel Outside of Texas. Complete Schedule T. Check if Iravel Outside of Texas. Complete Schedule T. Check if Iravel Outside of Texas. Complete Schedule T. Check if Iravel Outside of Texas. Complete Schedule T. Check if Iravel Outside of Texas. Complete Schedule T. Check if Iravel Outside of Texas. Complete Schedule T. Check if Iravel Outside of Texas. Complete Schedule T. Check if Iravel Outside of Texas. Check Iravel Outside of Texas. Check Iravel Outside of Texas. Check Iravel Outside of | Arranza, Kristian  Arrancisco, CA 94107  Arranza, Kristian  Arrancisco, CA 94107  Arrancisc |   | Credit Card Payment                         | The Instruction Guide explains how to comp                           | ete this form. |                       |                           |
|--|--|--|---|---|--|----------------|-----------------------|---------------------------|
| 4 Date 10/12/2024 5 Payee name Lyft Ride  6 Amount (\$) 7 Payee address; City; State; Zip Code  8 PURPOSE OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) Travel In District  (b) Description Check if ravel outside of Texas. Complete Schedule Transportation  Payee name Lyft Ride  Amount (\$) Payee address; City; State; Zip Code  2 Candidate/Officeholder name Office sought Office held  Amount (\$) Payee name Lyft Ride  Amount (\$) Payee address; City; State; Zip Code  \$18.85 Berry St Ste 50  San Francisco, CA 94107  PURPOSE OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) State; Zip Code  185 Berry St Ste 50  San Francisco, CA 94107  Category (see Categories listed at the top of this schedule) Check if ravel outside of Texas. Complete Schedule Transportation  Complete QNLY if direct  Candidate/Officeholder name Office sought Office held  | 4 Date 10/12/2024   5 Payee name Lyft Ride   6 Amount (\$) \$3.25   7 Payee address; City; State; Zip Code   8 PURPOSE OF EXPENDITURE   (a) Category (see Categories listed at the top of this schedule)   (b) Description   Check if austin, TX, officeholder living expense   10/19/2024   Candidate/Officeholder name   Office sought   10/19/2024   Lyft Ride   10/19/2024   Payee name   Lyft Ride   10/19/2024   Payee address; City; State; Zip Code   185 Berry St Ste 50   San Francisco, CA 94107   180 Purpose OF EXPENDITURE   181 Date   Payee name   Lyft Ride   182 Date   Payee name   Lyft Ride   183 Details   Payee address; City; State; Zip Code   185 Berry St Ste 50   San Francisco, CA 94107   180 Description   Check if ravel outside of Texas. Complete Schedule T.   180 Description   Check if Austin, TX, officeholder India  | type name  fit Ride  type address; City; State; Zip Code  is Berry St Ste 50  an Francisco, CA 94107  attegory (see Categories listed at the top of this schedule) avel In District    Check if travel outside of Texas. Complete Schedule T.  | 1 | Total pages Schedule F1:                    | 2 FILER NAME   |                | 3 Filer ID            | (Ethics Commission Filers |
| 10/12/2024   Lyft Ride   | 10/12/2024   Lyft Ride   | An Francisco, CA 94107  An Example 1 State; Zip Code  An Francisco, CA 94107  An Example 2 State 2 State; Zip Code  An Francisco, CA 94107  An Example 3 State; Zip Code  An Francisco, CA 94107  An Example 3 State; Zip Code  An Example 3 State; Zip Code  An Example 3 State; Zip Code  An Francisco, CA 94107  An Example 3 State; Zip Code  An Francisco, CA 94107  An Example 3 State; Zip Code  An Francisco, CA 94107  An Example 3 State; Zip Code  An Francisco, CA 94107  An Example 3 State; Zip Code  An Francisco, CA 94107  An Example 3 State; Zip Code  An Francisco, CA 94107  An Example 3 State; Zip Code  An Francisco, CA 94107  An Example 3 State; Zip Code  An Francisco, CA 94107  An Example 3 State; Zip Code  An Francisco, CA 94107  An Example 4 State; Zip Code  An Francisco, CA 94107  An Example 4 State; Zip Code  An Francisco, CA 94107  An Example 4 State; Zip Code  An Francisco, CA 94107  An Example 4 State; Zip Code  An Francisco, CA 94107  An Example 4 State; Zip Code  An Francisco, CA 94107  An Example 5 State; Zip Code  An Francisco, CA 94107  An Example 5 State; Zip Code  An Francisco, CA 94107  An Example 5 State; Zip Code  An Francisco, CA 94107  An Example 5 State; Zip Code  An Francisco, CA 94107  An Example 5 State; Zip Code  An Francisco, CA 94107  An Example 6 State; Zip Code  An Francisco, CA 94107  An Example 7 State; Zip Code  An Francisco, CA 94107  An Example 7 State; Zip Code  An Example 7 State; Zip Code |   | Sch: 33/55 Rpt:                             | Carranza, Kristian   |                | 00087920              |                           |
| 7 Payee address; City; State; Zip Code  \$3.25  8 PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule)  9 Complete ONLY if direct expenditure to benefit C/OH  Date 10/19/2024  Amount (\$) Payee name  Lyft Ride  Amount (\$) Payee address; City; State; Zip Code  \$18.85  Payee name  Lyft Ride  Amount (\$) Payee address; City; State; Zip Code  \$18.85  Payee address; City; State; Zip Code  San Francisco, CA 94107  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule)  Travel Out of District  (b) Description  (b) Description  (c) Description  (b) Description  (c) Check if ravel outside of Texas. Complete Schedule T.  (b) Description  (c) Check if ravel outside of Texas. Complete Schedule T.  (c) Check if Austin, TX, officeholder living expense  Transportation  Complete ONLY if direct  Complete ONLY if direct  Condidate/Officeholder name  Office sought  Office held  | San Francisco, CA 94107   Check if travel outside of Texas. Complete Schedule T.   Check if Austin, Tx, officeholder living expense Transportation   Office held   | An Francisco, CA 94107  Ittegory (See Categories listed at the top of this schedule)   Check if travel outside of Texas. Complete Schedule T.  | 4 | Date  | 5 Payee name   |                | •                     |                           |
| \$3.25   | \$3.25   | an Francisco, CA 94107  Ittegory (See Categories listed at the top of this schedule) avel In District    Check if Tavel outside of Texas. Complete Schedule T.   |   | 10/12/2024                                  |  |                |                       |                           |
| San Francisco, CA 94107  8 PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Travel In District  (b) Description   Check if Austin, TX, officeholder living expense Transportation  9 Complete QNLY if direct expenditure to benefit C/OH  Date 10/19/2024  Amount (\$) Payee name Lyft Ride  Payee address; City; State; Zip Code 185 Berry St Ste 50  San Francisco, CA 94107  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Travel Out of District  (b) Description   Check if Austin, TX, officeholder Texas. Complete Schedule T.   | San Francisco, CA 94107  8 PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Travel In District  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation  Office sought  Office held  Date 10/19/2024  Amount (\$) Payee name Lyft Ride  Payee address; City; State; Zip Code 185 Berry St Ste 50 San Francisco, CA 94107  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Travel Out of District  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation  | tegory (see Categories listed at the top of this schedule) avel In District    District   Check if travel outside of Texas. Complete Schedule T.   | 6 | Amount (\$)                                 | 7 Payee address; City; State; Zip Code                               |                |                       |                           |
| Complete ONLY if direct   Candidate/Officeholder name   Complete Control   Candidate/Officeholder name   Candidate/Offic   | Candidate/Officeholder name   Cand         | tegory (See Categories listed at the top of this schedule) avel In District    Check if ravel outside of Texas. Complete Schedule T.     Check if Austin, TX, officeholder living expense Transportation    Check if travel outside of Texas. Complete Schedule T.     Check if Austin, TX, officeholder living expense Transportation  |   | \$3.25                                      | 185 Berry St Ste 50  |                |                       |                           |
| 8 PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule)  Travel In District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Transportation  Office sought  Office held  Date 10/19/2024  Amount (\$)  Payee name Lyft Ride  Payee address; City; State; Zip Code  \$18.85  San Francisco, CA 94107  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Travel Out of District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder Iving expense  Transportation  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder Iving expense  Transportation  Complete ONLY if direct  Candidate/Officeholder name Office sought Office held   | Candidate/Officeholder name   Cand         | tegory (See Categories listed at the top of this schedule) avel In District    Check if ravel outside of Texas. Complete Schedule T.     Check if Austin, TX, officeholder living expense Transportation    Check if travel outside of Texas. Complete Schedule T.     Check if Austin, TX, officeholder living expense Transportation  |   |   |  |                |                       |                           |
| OF EXPENDITURE  Travel In District  Transportation  Office keld  Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense  Transportation  Office held  Office held  Payee name Lyft Ride  Amount (\$)  Payee address; City; State; Zip Code  \$18.85  San Francisco, CA 94107  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Travel Out of District  Travel Out of District  Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held  | Travel In District  Transportation  Transportation  Transportation  Office keld Austin, Tx, officeholder living expense  Transportation  Office held  Date 10/19/2024  Amount (\$)  Payee name Lyft Ride  Amount (\$)  Payee address; City; State; Zip Code  \$18.85  San Francisco, CA 94107  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Travel Out of District  (b) Description  Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation  | avel In District    Check if travel outside of Texas. Complete Schedule T.     Check if Austin, TX, officeholder living expense     Transportation   |   |   | San Francisco, CA 94107  |                |                       |                           |
| Payee name Lyft Ride  Amount (\$)  Payee address; City; State; Zip Code  \$18.85  Payee address; City; State; Zip Code  San Francisco, CA 94107  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule)  Travel Out of District  Candidate/Officeholder name  Office sought  Office held  Office held  Office held  Office held  Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense  Transportation  Office held   | Check if travel outside of Texas. Complete Schedule T.   Check if Austin, Tx, officeholder living expense Transportation   | avel In District    Check if travel outside of Texas. Complete Schedule T.     Check if Austin, TX, officeholder living expense  | 8 | PURPOSE                                     | (a) Category (See Categories listed at the top of this schedule)     | Description    |                       |                           |
| 9 Complete ONLY if direct expenditure to benefit C/OH  Date 10/19/2024   | 9 Complete ONLY if direct expenditure to benefit C/OH  Date  | Indidate/Officeholder name  Office sought  Office held   |   |   | ,  |                | outside of Texas. Con | plete Schedule T.         |
| 9 Complete ONLY if direct expenditure to benefit C/OH  Date  | 9 Complete ONLY if direct expenditure to benefit C/OH  Date 10/19/2024   | Addidate/Officeholder name  Office sought  Office held  |   | EXPENDITURE                                 |  | ш              |                       | g expense                 |
| Date   | Date 10/19/2024  Amount (\$)  Payee name Lyft Ride  Payee address; City; State; Zip Code  \$18.85  \$18.85  San Francisco, CA 94107  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Travel Out of District  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation   | An Francisco, CA 94107  Attegory (See Categories listed at the top of this schedule)  avel Out of District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Transportation  (didate/Officeholder name)  Office sought  Office held  |   |   |  | Transportatio  | on                    |                           |
| Date   | Date 10/19/2024  | An Francisco, CA 94107  Attegory (See Categories listed at the top of this schedule) avel Out of District  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation  (didate/Officeholder name Office sought Office held   | _ | 0 1: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: |  |                | 0‴ 1                  |                           |
| Lyft Ride  Amount (\$) Payee address; City; State; Zip Code  \$18.85 Payee address; City; State; Zip Code  San Francisco, CA 94107  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Travel Out of District  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held  | Lyft Ride  Amount (\$) Payee address; City; State; Zip Code  \$18.85 Payee address; City; State; Zip Code  \$18.85 Payee address; City; State; Zip Code  San Francisco, CA 94107  PURPOSE OF CATE OF Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense  Transportation    Check if Austin, TX, officeholder living expense Transportation   Check if Austin, TX, officeholder living expense   Check if Austin, TX, officehold    | Inft Ride  Inyee address; City; State; Zip Code  In Francisco, CA 94107  Integory (See Categories listed at the top of this schedule)  In avel Out of District  In Check if ravel outside of Texas. Complete Schedule T.  In Check if Austin, TX, officeholder living expense  Transportation  Indidate/Officeholder name  Office sought  Office held  | 9 |   |  |                | Office h              | eld                       |
| Lyft Ride  Amount (\$) Payee address; City; State; Zip Code  \$18.85 Payee address; City; State; Zip Code  San Francisco, CA 94107  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule)  Travel Out of District  (b) Description  Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense  Transportation  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held   | Lyft Ride  Amount (\$) Payee address; City; State; Zip Code  \$18.85 Payee address; City; State; Zip Code  \$18.85 Payee address; City; State; Zip Code  San Francisco, CA 94107  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule)  Travel Out of District  (b) Description  Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense  Transportation   | Inft Ride  Inyee address; City; State; Zip Code  In Francisco, CA 94107  Integory (See Categories listed at the top of this schedule)  In avel Out of District  In Check if ravel outside of Texas. Complete Schedule T.  In Check if Austin, TX, officeholder living expense  Transportation  Indidate/Officeholder name  Office sought  Office held  |   | ·   |  |                |                       |                           |
| Amount (\$)  Payee address; City; State; Zip Code  \$18.85  Payee address; City; State; Zip Code  San Francisco, CA 94107  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Travel Out of District  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held   | Amount (\$)  Payee address; City; State; Zip Code  185 Berry St Ste 50  San Francisco, CA 94107  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Travel Out of District  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation   | As Berry St Ste 50  An Francisco, CA 94107  Attegory (See Categories listed at the top of this schedule) avel Out of District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Transportation  Office held  |   |   | -  |                |                       |                           |
| \$18.85  San Francisco, CA 94107  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Travel Out of District  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held  | \$18.85   185 Berry St Ste 50    San Francisco, CA 94107  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Travel Out of District  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation  | an Francisco, CA 94107  ategory (See Categories listed at the top of this schedule) avel Out of District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Transportation  odidate/Officeholder name  Office sought  Office held   |   |   | Lyft Ride  |                |                       |                           |
| San Francisco, CA 94107  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Travel Out of District  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held   | San Francisco, CA 94107  PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Travel Out of District  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation   | an Francisco, CA 94107  Attegory (See Categories listed at the top of this schedule)  avel Out of District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Transportation  Office held   |   | ` '   |  |                |                       |                           |
| PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Travel Out of District  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held  | PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Travel Out of District  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation  | (b) Description  avel Out of District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Transportation  Office sought  Office held   |   | \$18.85                                     | 185 Berry St Ste 50  |                |                       |                           |
| PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Travel Out of District  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held  | PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Travel Out of District  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation  | (b) Description  avel Out of District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Transportation  Office sought  Office held   |   |   |  |                |                       |                           |
| Travel Out of District    Check if travel outside of Texas. Complete Schedule T.     Check if Austin, TX, officeholder living expense     Transportation   Complete ONLY if direct     Check if Austin, TX, officeholder living expense     Transportation     Check if travel outside of Texas. Complete Schedule T.     Check if Austin, TX, officeholder living expense     Transportation     Transportation     Check if Austin, TX, officeholder living expense     Transportation     Transportation    | OF EXPENDITURE  Travel Out of District  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Transportation   | avel Out of District  Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation  Office held  |   |   | San Francisco, CA 94107  |                |                       |                           |
| EXPENDITURE    Travel Out of District  | EXPENDITURE  Travel Out of District  Check if Austin, TX, officeholder living expense  Transportation  | Check if Austin, TX, officeholder living expense  Transportation  didate/Officeholder name  Office sought  Office held   |   |   | (a) Category (See Categories listed at the top of this schedule) (b) | Description    |                       |                           |
| Complete ONLY if direct Candidate/Officeholder name Office sought Office held  | Transportation   | Transportation  Ididate/Officeholder name  Office sought  Office held  |   |   | Travel Out of District   | ш              |                       |                           |
| Complete ONLY if direct Candidate/Officeholder name Office sought Office held  |  | didate/Officeholder name Office sought Office held   |   |   |  |                |                       | g expense                 |
| · · · · · · · · · · · · · · · · · · ·  |  |  |   |   |  | Tanoportatio   | ,,,,                  |                           |
|  | Complete UNLY it direct Candidate/Officeholder name Office sought Office held  |  |   | Complete ONLY if direct                     | Candidate/Officeholder name Office sought                            |                | Office h              | eld                       |
| experialitate to beliefit of or i  | expenditure to benefit C/OH  |  |   |   |  |                |                       |                           |
| Date Payee name  | Date Payee name  | avee name  |   | Date  | Payee name   |                |                       |                           |
|  |  | •  |   |   |  |                |                       |                           |
| Amount (\$) Payee address; City; State; Zip Code   |  |  |   |   | ,  |                |                       |                           |
|  |  |  |   |   |  |                |                       |                           |
| 410.00 100 Berry St Sid Sid  | 410.00 100 Bony of old 00  |  |   | Ψ10.00                                      | loo beny de die do   |                |                       |                           |
| San Francisco, CA 9/107  | San Francisco, CA 9/107  |  |   |   | San Francisco, CA 9/107  |                |                       |                           |
|  |  | 55 Berry St Ste 50   |   | DUDDOCE                                     |  | 5              |                       |                           |
| (a) Category (See Categories listed at the top of this schedule) (D) Description   | OF 1   | an Francisco, CA 94107   |   |   | , , ,  |                | outside of Texas. Com | nplete Schedule T.        |
| OF Travel Out of District Travel Out  | EXPENDITURE Check if Austin, TX, officeholder living expense   | 25 Berry St Ste 50  an Francisco, CA 94107  ategory (See Categories listed at the top of this schedule)  (b) Description   |   | EXPENDITURE                                 | Travel Out of District   |                |                       |                           |
| EXPENDITURE   Travel Out of District   Limited and the district   Limited a | Transportation   | 25 Berry St Ste 50  an Francisco, CA 94107  ategory (See Categories listed at the top of this schedule) avel Out of District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  |   |   |  | Transportatio  | on                    |                           |
| EXPENDITURE    Travel Out of District   Check if Austin, TX, officeholder living expense   | ı  | an Francisco, CA 94107  ategory (See Categories listed at the top of this schedule) avel Out of District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  |   |   |  |                |                       |                           |
| EXPENDITURE    Travel Out of District   Check if Austin, TX, officeholder living expense   |  | an Francisco, CA 94107  ategory (See Categories listed at the top of this schedule) avel Out of District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  |   | Complete ONLY if direct                     |  |                | Office h              | eld                       |
| EXPENDITURE    Travel Out of District  |  | an Francisco, CA 94107  ategory (See Categories listed at the top of this schedule) avel Out of District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Transportation  |   | expenditure to benefit C/OI                 | 1  |                |                       |                           |
| EXPENDITURE  I ravel Out of District  Check if Austin, TX, officeholder living expense  Transportation   |  | an Francisco, CA 94107  ategory (See Categories listed at the top of this schedule) avel Out of District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Transportation  |   |   |  |                |                       |                           |
| EXPENDITURE    Travel Out of District  |  | an Francisco, CA 94107  ategory (See Categories listed at the top of this schedule) avel Out of District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Transportation  |   |   |  |                |                       |                           |
| 10/19/2024 Lyft Ride   |  | •  |   |   |  |                |                       |                           |
| Amount (\$) Payee address: City: State: 7in Code   | Amount (\$) Payee address: City: State: 7in Code   | wee address: City: State: 7in Code   |   | Amount (\$)                                 | Payee address: City: State: 7in Code                                 |                |                       |                           |
|  |  | vee address. City. State. 70 Code  |   |   |  |                |                       |                           |
| \$15.86 185 Berry St Ste 50  | \$15.86   185 Berry St Ste 50  |  |   | \$15.86                                     | 185 Berry St Ste 50  |                |                       |                           |
|  |  |  |   |   |  |                |                       |                           |
| San Francisco, CA 94107  | San Francisco, CA 94107  |  |   |   | San Francisco, CA 94107  |                |                       |                           |
|  |  | 55 Berry St Ste 50   |   | PURPOSE                                     |  | Description    |                       |                           |
| PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description   | OF 1   | an Francisco, CA 94107   |   |   | , , ,  |                | outside of Tayas Com  | nnlete Schedule T         |
|  | EXPENDITION   Travel Out of District   Creative dualities of Texas. Complete Schedule 1.   | 25 Berry St Ste 50  an Francisco, CA 94107  ategory (See Categories listed at the top of this schedule)  (b) Description   |   |   | Travel Out of District   |                |                       |                           |
| EXPENDITURE   Travel Out of District   Limited and the district   Limited a | Check if Austin, TX, officeholder living expense   | 25 Berry St Ste 50  an Francisco, CA 94107  ategory (See Categories listed at the top of this schedule) avel Out of District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  |   |   |  | ш              |                       | g expense                 |
| EXPENDITURE   Travel Out of District   Limited and the district   Limited a | Transportation   | 25 Berry St Ste 50  an Francisco, CA 94107  ategory (See Categories listed at the top of this schedule) avel Out of District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  |   |   |  | Transportatio  | n                     |                           |
| EXPENDITURE    Travel Out of District   Check if Austin, TX, officeholder living expense   | Transportation   | an Francisco, CA 94107  ategory (See Categories listed at the top of this schedule) avel Out of District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  |   |   |  | Fransportatio  | on                    |                           |
| EXPENDITURE    Travel Out of District   Check if Austin, TX, officeholder living expense   | Transportation   | an Francisco, CA 94107  ategory (See Categories listed at the top of this schedule) avel Out of District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  |   |   |  | ıransportatio  | on                    |                           |
| EXPENDITURE    Travel Out of District   Check if Austin, TX, officeholder living expense   | Hansportation  | an Francisco, CA 94107  ategory (See Categories listed at the top of this schedule) avel Out of District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  |   |   |  | παπορυπαπο     | /II                   |                           |
| EXPENDITURE    Travel Out of District   Check if Austin, TX, officeholder living expense   |  | an Francisco, CA 94107  ategory (See Categories listed at the top of this schedule) avel Out of District  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense  | l |   |  | •              |                       |                           |
| EXPENDITURE    Travel Out of District   Check if Austin, TX, officeholder living expense   |  | an Francisco, CA 94107  ategory (See Categories listed at the top of this schedule) avel Out of District  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense  | l |   |  |                |                       |                           |
| EXPENDITURE    Travel Out of District   Check if Austin, TX, officeholder living expense   |  | an Francisco, CA 94107  ategory (See Categories listed at the top of this schedule) avel Out of District  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense  | _ | Complete ONLV if direct                     | Candidate/Officeholder name Office cought                            |                | Office h              | old                       |
| EXPENDITURE  Travel Out of District  Check if Austin, TX, officeholder living expense  Transportation  |  | an Francisco, CA 94107  ategory (See Categories listed at the top of this schedule) avel Out of District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Transportation  |   |   |  |                | Office h              | eld                       |
| EXPENDITURE    Travel Out of District  |  | an Francisco, CA 94107  ategory (See Categories listed at the top of this schedule) avel Out of District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Transportation  |   | or portantare to perion 0/01                | •  |                |                       |                           |
| EXPENDITURE    Travel Out of District  |  | an Francisco, CA 94107  ategory (See Categories listed at the top of this schedule) avel Out of District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Transportation  |   |   |  |                |                       |                           |
| EXPENDITURE    Travel Out of District  |  | an Francisco, CA 94107  ategory (See Categories listed at the top of this schedule) avel Out of District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Transportation  |   |   |  |                |                       |                           |
| EXPENDITURE    Travel Out of District  |  | an Francisco, CA 94107  ategory (See Categories listed at the top of this schedule) avel Out of District  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Transportation  |   |   |  |                |                       |                           |

### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

|   | Candidate/Officeholder/Politica<br>Credit Card Payment |                 | Legal Services               | Salaries/             | Wages   | s/Contract Labor   |       | OTHER (enter a      | category not listed a | above)        |
|---|--|-----------------|------------------------------|-----------------------|---------|--------------------|-------|---------------------|-----------------------|---------------|
| _ |  | <del></del>     | The Instruction Guid         | de explains now to c  | Ullipid | -                  |       |                     |                       |               |
| 1 | Total pages Schedule F1:                               | 2 FILER NAM     | E                            |                       |         |                    | 3     | Filer ID            | (Ethics Commis        | ssion Filers) |
|   | Sch: 34/55 Rpt:  | Carranza,       |                              |                       |         |                    |       | 00087920            |                       |               |
| 4 | Date   | 5 Payee name    | 9                            |                       |         |                    |       |                     |                       |               |
|   | 10/20/2024   | Lyft Ride       |                              |                       |         |                    |       |                     |                       |               |
| 6 | Amount (\$)  | 7 Payee addre   | ess; City;                   | State; Zip C          | ode     |                    |       |                     |                       |               |
|   | \$15.99  | 185 Berry       | St Ste 50                    |                       |         |                    |       |                     |                       |               |
|   |  |                 |                              |                       |         |                    |       |                     |                       |               |
|   |  | San Franci      | sco, CA 94107                |                       |         |                    |       |                     |                       |               |
| 8 | PURPOSE  | (a) Category (s | See Categories listed at the | top of this schedule) | (b)     | Description        |       |                     |                       |               |
|   | OF<br>EXPENDITURE                                      | Travel In D     |                              | ,                     |         | Check if travel of | outsi | de of Texas. Com    | plete Schedule T.     |               |
|   | EXPENDITORE  |                 |                              |                       |         | $\Box$             |       | officeholder living | g expense             |               |
|   |  |                 |                              |                       |         | Transportation     | n     |                     |                       |               |
|   |  |                 |                              |                       |         |                    |       |                     |                       |               |
| 9 | Complete ONLY if direct expenditure to benefit C/OI    |                 | ficeholder name              | Office so             | ught    |                    |       | Office he           | eld                   |               |
|   | experialitare to beliefit eroi                         |                 |                              |                       |         |                    |       |                     |                       |               |
|   | Date   | Payee name      | 9                            |                       |         |                    |       |                     |                       |               |
|   | 10/20/2024   | Lyft Ride       |                              |                       |         |                    |       |                     |                       |               |
|   | Amount (\$)  | Payee addre     | ess; City;                   | State; Zip C          | ode     |                    |       |                     |                       |               |
|   | \$11.79  | 185 Berry       | St Ste 50                    |                       |         |                    |       |                     |                       |               |
|   |  |                 |                              |                       |         |                    |       |                     |                       |               |
|   |  | San Franci      | sco, CA 94107                |                       |         |                    |       |                     |                       |               |
|   | PURPOSE  | (a) Category (S | See Categories listed at the | top of this schedule) | (b)     | Description        |       |                     |                       |               |
|   | OF<br>EXPENDITURE                                      | Travel In D     |                              |                       |         | Check if travel of | outsi | de of Texas. Com    | plete Schedule T.     |               |
|   | EXPENDITORE  |                 |                              |                       |         | _                  |       | officeholder living | g expense             |               |
|   |  |                 |                              |                       |         | Transportation     | n     |                     |                       |               |
|   |  |                 |                              |                       |         |                    |       |                     |                       |               |
|   | Complete ONLY if direct expenditure to benefit C/OI    |                 | ficeholder name              | Office so             | ught    |                    |       | Office he           | eld                   |               |
|   | experiulture to beriefft C/Oi                          | -1              |                              |                       |         |                    |       |                     |                       |               |
|   | Date   | Payee name      |                              |                       |         |                    |       |                     |                       |               |
|   | 10/21/2024   | Lyft Ride       |                              |                       |         |                    |       |                     |                       |               |
|   | Amount (\$)  | Payee addre     | ess; City;                   | State; Zip C          | ode     |                    |       |                     |                       |               |
|   | \$17.99  | 185 Berry       | St Ste 50                    |                       |         |                    |       |                     |                       |               |
|   |  |                 |                              |                       |         |                    |       |                     |                       |               |
|   |  | San Franci      | sco, CA 94107                |                       |         |                    |       |                     |                       |               |
|   | PURPOSE  | (a) Category (s | See Categories listed at the | top of this schedule) | (b)     | Description        |       |                     |                       |               |
|   | OF<br>EXPENDITURE                                      | Travel In D     |                              |                       |         |                    | outsi | de of Texas. Com    | plete Schedule T.     |               |
|   | EXPENDITURE  |                 |                              |                       |         |                    |       | officeholder living | g expense             |               |
|   |  |                 |                              |                       |         | Transportation     | n     |                     |                       |               |
|   |  |                 |                              |                       |         |                    |       |                     |                       |               |
|   | Complete ONLY if direct                                |                 | ficeholder name              | Office so             | ught    |                    |       | Office h            | eld                   |               |
|   | expenditure to benefit C/OI                            | ٦               |                              |                       |         |                    |       |                     |                       |               |
|   |  |                 |                              |                       |         |                    |       |                     |                       |               |

### SCHEDULE F1

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

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

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

|   | Credit Card Payment                                 |          | The Instruction Guide explains how to c   | ompl     | lete this form.  |
|---|---|----------|---|----------|--|
| 1 | Total pages Schedule F1:                            | 2        | FILER NAME  |          | 3 Filer ID (Ethics Commission Filers)                              |
|   | Sch: 35/55 Rpt:                                     |          | Carranza, Kristian  |          | 00087920   |
| 4 | Date  | 5        | Payee name  |          | •  |
|   | 10/22/2024  |          | Lyft Ride   |          |  |
| 6 | Amount (\$)   | 7        | Payee address; City; State; Zip C   | ode      |  |
|   | \$25.29   |          | 185 Berry St Ste 50   |          |  |
|   |   |          |   |          |  |
|   |   |          | San Francisco, CA 94107   |          |  |
| 8 | PURPOSE   | (a)      | Category (See Categories listed at the top of this schedule)  | (b)      | ) Description  |
|   | OF<br>EXPENDITURE                                   |          | Travel Out of District  |          | Check if travel outside of Texas. Complete Schedule T.             |
|   | EXI ENDITORE  |          |   |          | Check if Austin, TX, officeholder living expense  Transportation   |
|   |   |          |   |          | Hansportation  |
| 9 | Complete ONLY if direct                             | <u> </u> | Candidate/Officeholder name Office so   | uaht     | Office held  |
|   | expenditure to benefit C/Ol                         |          | Candidate/Officeriolder frame Office so   | ugnt     | Office field   |
| _ | Data  | Т        | David and the second |          |  |
|   | Date<br>10/23/2024                                  |          | Payee name<br>Lyft Ride   |          |  |
|   |   | ┡        | •   |          |  |
|   | Amount (\$) \$19.93                                 |          | Payee address; City; State; Zip C   | oue      |  |
|   | Ф19.93  |          | 185 Berry St Ste 50   |          |  |
|   |   |          | Con Francisco CA 04107  |          |  |
|   |   | L        | San Francisco, CA 94107   | 1        |  |
|   | PURPOSE<br>OF                                       | (a)      | Category (See Categories listed at the top of this schedule)  | (b)      | Description Check if travel outside of Texas. Complete Schedule T. |
|   | EXPENDITURE   |          | Travel Out of District  |          | Check if dustin, TX, officeholder living expense                   |
|   |   |          |   |          | Transportation   |
|   |   |          |   |          |  |
|   | Complete ONLY if direct                             |          | Candidate/Officeholder name Office so   | ught     | Office held  |
|   | expenditure to benefit C/O                          | Н        |   |          |  |
|   | Date  |          | Payee name  |          |  |
|   | 10/25/2024  |          | Lyft Ride   |          |  |
|   | Amount (\$)   | T        | Payee address; City; State; Zip C   | ode      |  |
|   | \$11.66   |          | 185 Berry St Ste 50   |          |  |
|   |   |          |   |          |  |
|   |   |          | San Francisco, CA 94107   |          |  |
|   | PURPOSE   | (a       | Category (See Categories listed at the top of this schedule)  | (b)      | ) Description  |
|   | OF  |          | Travel In District  | ``       | Check if travel outside of Texas. Complete Schedule T.             |
|   | EXPENDITURE   |          |   |          | Check if Austin, TX, officeholder living expense                   |
|   |   |          |   |          | Transportation   |
|   |   |          |   | <u> </u> |  |
|   | Complete ONLY if direct expenditure to benefit C/Ol |          | Candidate/Officeholder name Office so   | ught     | Office held  |
|   |   | -        |   |          |  |
|   |   |          |   |          |  |
|   |   |          |   |          |  |

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committ

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

### SCHEDULE F1

Advertising Expense Ev Accounting/Banking Fe Consulting Expense Fo Contributions/ Onations Made By -

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

|   | Candidate/Officeholder/Politica<br>Credit Card Payment   | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form. |  |  |  |
|---|--|---|--|--|--|
| 1 | Total pages Schedule F1:   | 2 FILER NAME 3 Filer ID (Ethics Commission Filers)  |  |  |  |
|   | Sch: 37/55 Rpt:  | Carranza, Kristian 00087920   |  |  |  |
| 4 | Date   | 5 Payee name  |  |  |  |
|   | 10/04/2024   | Map Political Communication   |  |  |  |
| 6 | Amount (\$)  | 7 Payee address; City; State; Zip Code  |  |  |  |
|   | \$25,257.66  | 2400 S 4th St   |  |  |  |
|   |  |   |  |  |  |
|   |  | Austin, TX 78704  |  |  |  |
| 8 | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description  |  |  |  |
|   | OF<br>EXPENDITURE  | Advertising Expense Check if travel outside of Texas. Complete Schedule T.  |  |  |  |
|   | -  | Check if Austin, TX, officeholder living expense  Direct Mailers  |  |  |  |
|   |  | Direct Mallers  |  |  |  |
| 9 | Complete ONLY if direct  | Candidate/Officeholder name Office sought Office held   |  |  |  |
| 9 | expenditure to benefit C/O   |   |  |  |  |
| _ | Data   |   |  |  |  |
|   | Date   | Payee name  |  |  |  |
|   | 10/07/2024   | Map Political Communication   |  |  |  |
|   | Amount (\$)  | Payee address; City; State; Zip Code  |  |  |  |
|   | \$9,444.67   | 2400 S 4th St   |  |  |  |
|   |  |   |  |  |  |
|   |  | Austin, TX 78704  |  |  |  |
|   | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description  |  |  |  |
|   | OF<br>EXPENDITURE  | Advertising Expense Check if travel outside of Texas. Complete Schedule T.  |  |  |  |
|   |  | Check if Austin, TX, officeholder living expense  Direct Mailers  |  |  |  |
|   |  | Direct Mailers  |  |  |  |
|   | Complete ONLY if direct  | Candidate/Officeholder name Office sought Office held   |  |  |  |
|   | Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH |   |  |  |  |
| _ | Data   |   |  |  |  |
|   | Date   | Payee name  Man Political Communication   |  |  |  |
|   | 10/21/2024   | Map Political Communication   |  |  |  |
|   | Amount (\$)  | Payee address; City; State; Zip Code  |  |  |  |
|   | \$4,703.84   | 2400 S 4th St   |  |  |  |
|   |  |   |  |  |  |
|   |  | Austin, TX 78704  |  |  |  |
|   | PURPOSE<br>OF  | (a) Category (See Categories listed at the top of this schedule) (b) Description  |  |  |  |
|   | EXPENDITURE  | Advertising Expense Check if travel outside of Texas. Complete Schedule T.  |  |  |  |
|   |  | Check if Austin, TX, officeholder living expense  Direct Mailers  |  |  |  |
|   |  | Direct Mailers  |  |  |  |
| _ | Complete ONLY if direct  | Candidate/Officeholder name Office sought Office held   |  |  |  |
|   | expenditure to benefit C/O   |   |  |  |  |
|   |  |   |  |  |  |
|   |  |   |  |  |  |
|   |  |   |  |  |  |

### SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage
Contribution Description Mode By

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

# SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
sing Expense Event Expense Loan Repayment/Reimbu

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

|          | Candidate/Officeholder/Politica<br>Credit Card Payment | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form. |
|----------|--|---|
| 1        | Total pages Schedule F1:                               | 2 FILER NAME 3 Filer ID (Ethics Commission Filers)  |
|          | Sch: 40/55 Rpt:  | Carranza, Kristian 00087920   |
| 4        | Date   | 5 Payee name  |
|          | 09/30/2024   | Prima Pasta Italian   |
| 6        | Amount (\$)  | 7 Payee address; City; State; Zip Code  |
|          | \$84.20  | 6811 Kirby Dr   |
|          |  |   |
|          |  | Houston, TX 77030   |
| 8        | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description  |
|          | OF<br>EXPENDITURE                                      | Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  |
|          |  | Check if Austin, TX, officeholder living expense  Campaign Meal   |
|          |  | Campaigh Meal   |
| 9        | Complete ONLY if direct                                | Candidate/Officeholder name Office sought Office held   |
|          | expenditure to benefit C/OI                            |   |
| ⊨        | Date   | Davida marea  |
|          | 10/04/2024   | Payee name Print With Me  |
| L        |  |   |
|          | Amount (\$)  | Payee address; City; State; Zip Code  |
|          | \$7.66   | 445 W Erie St   |
|          |  |   |
|          |  | Chicago, IL 60654   |
|          | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description  |
|          | OF<br>EXPENDITURE                                      | Printing Expense Check if travel outside of Texas. Complete Schedule T.   |
|          |  | Check if Austin, TX, officeholder living expense Printing Services  |
|          |  | Filliuling Services   |
| ┝        | Complete ONLY if direct                                | Candidate/Officeholder name Office sought Office held   |
|          | expenditure to benefit C/OI                            |   |
| ⊨        | Data   |   |
|          | Date   | Payee name  |
|          | 10/21/2024   | QT  |
|          | Amount (\$)  | Payee address; City; State; Zip Code  |
|          | \$11.72  | 9630 S Zarzamora  |
|          |  |   |
|          |  | San Antonio, TX 78224   |
|          | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description  |
|          | OF<br>EXPENDITURE                                      | Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  |
|          |  | Check if Austin, TX, officeholder living expense  Campaign Refreshments   |
|          |  | Campaign Renestiments   |
| $\vdash$ | Complete ONLY if direct                                | Candidate/Officeholder name Office sought Office held   |
|          | expenditure to benefit C/OI                            |   |
| $\vdash$ |  |   |
|          |  |   |
|          |  |   |

### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

|   | Contributions/ Donations Made By<br>Candidate/Officeholder/Politica<br>Credit Card Payment |   | ut of District<br>enter a category not listed above) |
|---|--|---|--|
| 1 | Total pages Schedule F1:   | : 2 FILER NAME 3 Filer ID   | (Ethics Commission Filers)                           |
| Ĺ | Sch: 41/55 Rpt:  | Carranza, Kristian 00087  | ,  |
| 4 | Date   | 5 Payee name  |  |
|   | 10/10/2024   | SOTX  |  |
| 6 | Amount (\$)  | 7 Payee address; City; State; Zip Code  |  |
|   | \$25.00  | 3128 Sidney Brooks  |  |
|   |  |   |  |
|   |  | San Antonio, TX 78235   |  |
| 8 | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description  |  |
|   | OF<br>EXPENDITURE  | Contributions/Donations Made By  Condidate/Office helder/Political Committee  Check if Austin TV officehold                                 | •  |
|   |  | Candidate/Officeholder/Political Committee Campaign Event   | er inving expense                                    |
|   |  | Campaign Event  |  |
| 9 | Complete ONLY if direct  | Candidate/Officeholder name Office sought Off   | ice held   |
|   | expenditure to benefit C/OI  |   |  |
| _ | Date   | Payee name  |  |
|   | 09/29/2024   | Sayda Mitchell-Morales for East Central ISD School Board Trustee, Distric   | t 4  |
|   | Amount (\$)  | Payee address; City; State; Zip Code  |  |
|   | \$118.00   | 10434 Green Lake Dr   |  |
|   |  |   |  |
|   |  | San Antonio, TX 78223   |  |
|   | PURPOSE<br>OF  | (a) Category (See Categories listed at the top of this schedule)  (b) Description   | - Occupate Cabadala T                                |
|   | EXPENDITURE  | Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texa Check if Austin, TX, officehold |  |
|   |  | Candidate/Onicerioide//Political Committee Campaign Contribution  | - J  |
|   |  |   |  |
|   | Complete ONLY if direct  | •   | ice held   |
|   | expenditure to benefit C/OI  | חע  |  |
|   | Date   | Payee name  |  |
|   | 10/23/2024   | Scale To Win  |  |
|   | Amount (\$)  | Payee address; City; State; Zip Code  |  |
|   | \$1,950.04   | 13742 Harper Street   |  |
|   |  |   |  |
|   |  | Santa Ana, CA 92703   |  |
|   | PURPOSE<br>OF  | (a) Category (See Categories listed at the top of this schedule) (b) Description  |  |
|   | EXPENDITURE  | Advertising Expense Check if travel outside of Texa   | •  |
|   |  | Texting Services  | er maning exherise                                   |
|   |  |   |  |
|   | Complete ONLY if direct  |   | ice held   |
|   | expenditure to benefit C/OI  | DH  |  |
|   |  |   |  |
|   |  |   |  |
|   |  |   |  |

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
g Expense Event Expense Loan Repayment/Reimbu

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committe

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

|   | Candidate/Officeholder/Politica<br>Credit Card Payment | Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.   |
|---|--|--|
| 1 | Total pages Schedule F1:                               | 2 FILER NAME 3 Filer ID (Ethics Commission Filers)   |
|   | Sch: 42/55 Rpt:  | Carranza, Kristian 00087920  |
| 4 | Date   | 5 Payee name   |
|   | 09/29/2024   | Shell Oil  |
| 6 | Amount (\$)  | 7 Payee address; City; State; Zip Code   |
|   | \$23.97  | 2999 N Hwy 123 Bypass  |
|   |  |  |
|   |  | Seguin, TX 78155   |
| 8 | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description   |
|   | OF<br>EXPENDITURE                                      | Travel In District Check if travel outside of Texas. Complete Schedule T.  |
|   |  | Check if Austin, TX, officeholder living expense  Transportation/Gas   |
|   |  | Transportation/Gas   |
| 9 | Complete ONLY if direct                                | Candidate/Officeholder name Office sought Office held  |
|   | expenditure to benefit C/OI                            |  |
| ⊨ | Data   |  |
|   | Date   | Payee name   |
|   | 10/09/2024   | Shell Oil  |
|   | Amount (\$)  | Payee address; City; State; Zip Code   |
|   | \$34.15  | 527 W Cevallos   |
|   |  |  |
|   |  | San Antonio, TX 78204  |
|   | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description   |
|   | OF<br>EXPENDITURE                                      | Travel In District Check if travel outside of Texas. Complete Schedule T.  |
|   |  | Check if Austin, TX, officeholder living expense   |
|   |  | Transportation/Gas   |
| L | Complete ONL V if direct                               | Candidate/Officeholder name Office sought Office held  |
|   | Complete ONLY if direct expenditure to benefit C/OI    |  |
| ⊨ |  |  |
|   | Date   | Payee name   |
|   | 10/12/2024   | Shell Oil  |
|   | Amount (\$)  | Payee address; City; State; Zip Code   |
|   | \$28.33  | 15311 Lookout Rd   |
|   |  |  |
|   |  | Selma, TX 78154  |
|   | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description   |
|   | OF<br>EXPENDITURE                                      | Travel In District Check if travel outside of Texas. Complete Schedule T.  |
|   | LXI LINDITORL  | Check if Austin, TX, officeholder living expense   |
|   |  | Transportation/Gas   |
| L | Operation ONE VIII II                                  | Our district Office health are now as the control of the country o |
| I | Complete ONLY if direct expenditure to benefit C/OI    | Candidate/Officeholder name Office sought Office held  |
| L |  |  |
|   |  |  |
| L |  |  |

## SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

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

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

|          | Credit Card Payment                                 | The Instruction Guide explains how to complete this form.                        |  |
|----------|---|--|--|
| 1        | Total pages Schedule F1:                            | 2 FILER NAME   | 3 Filer ID (Ethics Commission Filers)                                      |
|          | Sch: 43/55 Rpt:                                     | Carranza, Kristian   | 00087920   |
| 4        | Date  | 5 Payee name   |  |
|          | 10/26/2024  | Shell Oil  |  |
| 6        | Amount (\$)   | 7 Payee address; City; State; Zip Code   |  |
|          | \$32.68   | 3319 Pleasanton Rd   |  |
|          |   |  |  |
|          |   | San Antonio, TX 78221  |  |
| 8        | PURPOSE   | (a) Category (See Categories listed at the top of this schedule) (b) Description |  |
|          | OF  |  | outside of Texas. Complete Schedule T.                                     |
|          | EXPENDITURE   |  | n, TX, officeholder living expense   |
|          |   | Transportation   | on/Gas   |
|          |   |  |  |
| 9        | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought  | Office held  |
|          | experientare to benefit Grot                        |  |  |
|          | Date  | Payee name   |  |
|          | 10/12/2024  | Sonic Drive In   |  |
|          | Amount (\$)   | Payee address; City; State; Zip Code   |  |
|          | \$13.07   | 16401 Nacogdoches  |  |
|          |   |  |  |
|          |   | San Antonio, TX 78247  |  |
|          | PURPOSE   | (a) Category (See Categories listed at the top of this schedule) (b) Description |  |
|          | OF<br>EXPENDITURE                                   | Food/Beverage Expense  | outside of Texas. Complete Schedule T.                                     |
|          | LAI LINDITORE                                       |  | n, TX, officeholder living expense   |
|          |   | Campaign N   | eai  |
| _        | Complete ONLY if direct                             | Candidate/Officeholder name Office sought  | Office held  |
|          | expenditure to benefit C/OI                         |  | Office field   |
|          |   |  |  |
|          | Date  | Payee name   |  |
|          | 10/15/2024  | Spectrum   |  |
|          | Amount (\$)   | Payee address; City; State; Zip Code   |  |
|          | \$219.81  | 12238 Silicon Dr Ste 129   |  |
|          |   |  |  |
|          |   | San Antonio, TX 78249  |  |
|          | PURPOSE<br>OF                                       | (a) Category (See Categories listed at the top of this schedule) (b) Description |  |
|          | EXPENDITURE   | Office Overficad/Nertial Experise  | outside of Texas. Complete Schedule T.  n, TX, officeholder living expense |
|          |   | Internet   | i, 17, Unicertolider living expense  |
|          |   | , monet  |  |
| $\vdash$ | Complete ONLY if direct                             | Candidate/Officeholder name Office sought  | Office held  |
|          | expenditure to benefit C/OI                         |  |  |
| $\vdash$ |   |  |  |
|          |   |  |  |
|          |   |  |  |

#### SCHEDULE F1

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

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarise Wagnes/Contract Labor

|          | Contributions/ Donations Made By<br>Candidate/Officeholder/Politica<br>Credit Card Payment |   |
|----------|--|---|
| 1        | Total pages Schedule F1:   | _   |
| -        | Sch: 44/55 Rpt:  | Carranza, Kristian 00087920   |
| 4        | Date   | 5 Payee name  |
|          | 10/21/2024   | Squarespace Inc.  |
| 6        | Amount (\$)  | 7 Payee address; City; State; Zip Code  |
|          | \$10.72  | 225 Varick St   |
|          |  |   |
|          |  | New York, NY 10014  |
| 8        | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description  |
|          | OF<br>EXPENDITURE  | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.   |
|          |  | Check if Austin, TX, officeholder living expense  Web Hosting Platform  |
|          |  | Web Hosting Flationii   |
| Ļ        |  |   |
| 9        | Complete ONLY if direct expenditure to benefit C/OI  | Candidate/Officeholder name Office sought Office held   |
|          |  |   |
|          | Date   | Payee name  |
|          | 10/14/2024   | Squarespace Inc   |
|          | Amount (\$)  | Payee address; City; State; Zip Code  |
|          | \$24.52  | 225 Varick St   |
|          |  |   |
|          |  | New York, NY 10014  |
|          | PURPOSE<br>OF  | (a) Category (See Categories listed at the top of this schedule) (b) Description  |
|          | EXPENDITURE  | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense |
|          |  | Web Hosting Platform  |
|          |  | TVOS FICOLING FICALIONIII   |
| _        | Complete ONLY if direct  | Candidate/Officeholder name Office sought Office held   |
|          | expenditure to benefit C/OI  |   |
| $\vdash$ | Date   | Daysa nama  |
|          |  | Payee name St. Lawrence Church  |
|          | 10/10/2024   | St. Lawrence Church   |
|          | Amount (\$)  | Payee address; City; State; Zip Code  |
|          | \$200.00   | 236 E Petaluma Blvd   |
|          |  |   |
|          |  | San Antonio, TX 78221   |
|          | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description  |
|          | OF<br>EXPENDITURE  | Contributions/Donations Made By   |
|          | LXI LINDITORL  | Candidate/Officeholder/Political Committee  |
|          |  | Contribution  |
|          | 0 1. 5   |   |
|          | Complete ONLY if direct expenditure to benefit C/OI  | Candidate/Officeholder name Office sought Office held   |
|          | Emportante to benefit 0/01   |   |
|          |  |   |
|          |  |   |
|          |  |   |

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries Wagnes/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

|   | Credit Card Payment                                 | The Instruction Guide explains how to complete this form.  |
|---|---|--|
| 1 | Total pages Schedule F1:                            |  |
|   | Sch: 45/55 Rpt:                                     | Carranza, Kristian 00087920  |
| 4 | Date  | 5 Payee name   |
|   | 09/28/2024  | Starbucks Store  |
| 6 | Amount (\$)   | 7 Payee address; City; State; Zip Code   |
|   | \$29.12   | 1935 SW Military   |
|   |   |  |
|   |   | San Antonio, TX 78221  |
| 8 | PURPOSE   | (a) Category (See Categories listed at the top of this schedule) (b) Description   |
|   | OF<br>EXPENDITURE                                   | Food/Beverage Expense  Check if travel outside of Texas. Complete Schedule T.  |
|   | LAPENDITORE   | Check if Austin, TX, officeholder living expense   |
|   |   | Campaign Refreshments  |
| _ | 0 1: 0.11.7.7.1.                                    |  |
| 9 | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held  |
|   |   |  |
|   | Date  | Payee name   |
|   | 10/09/2024  | Starbucks Store  |
|   | Amount (\$)   | Payee address; City; State; Zip Code   |
|   | \$14.42   | 1935 SW Military   |
|   |   |  |
|   |   | San Antonio, TX 78221  |
|   | PURPOSE   | (a) Category (See Categories listed at the top of this schedule) (b) Description   |
|   | OF<br>EXPENDITURE                                   | Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.   |
|   |   | Check if Austin, TX, officeholder living expense  Campaign Refreshments  |
|   |   | Cumpuigh Neiresillients  |
|   | Complete ONLY if direct                             | Candidate/Officeholder name Office sought Office held  |
|   | expenditure to benefit C/OI                         |  |
|   | Date  | Davisa nama  |
|   | 10/24/2024  | Payee name Starbucks Store   |
|   |   |  |
|   | Amount (\$) \$18.16                                 | Payee address; City; State; Zip Code<br>1935 SW Military   |
|   | Φ10.10  | 1933 SVV Willitary   |
|   |   | Can Antonia TV 70001   |
|   |   | San Antonio, TX 78221  |
|   | PURPOSE<br>OF                                       | (a) Category (See Categories listed at the top of this schedule)  Food/Reverage Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T. |
|   | EXPENDITURE   | Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense                                   |
|   |   | Campaign Refreshments  |
|   |   |  |
|   | Complete ONLY if direct                             | Candidate/Officeholder name Office sought Office held  |
|   | expenditure to benefit C/OI                         | 1  |
| _ |   |  |
|   |   |  |
|   |   |  |

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gitt/Awards/Memorials Expense Printing Expense
Legal Services Salaries/Wangs/Contract Labor

| Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category Credit Card Payment The Instruction Guide explains how to complete this form.  | not listed above)    |
|--|----------------------|
| 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethic  | s Commission Filers) |
| Sch: 46/55 Rpt: Carranza, Kristian 00087920  |                      |
| 5 Payee name   |                      |
| 10/25/2024 Starbucks Store   |                      |
| 7 Payee address; City; State; Zip Code   |                      |
| \$12.04   1935 SW Military   |                      |
|  |                      |
| San Antonio, TX 78221  |                      |
| B PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description   |                      |
| OF EXPENDITURE Food/Beverage Expense Check if travel outside of Texas. Complete Sch  |                      |
| Check if Austin, TX, officeholder living expense Campaign Refreshments   | 2                    |
| Campaign Renestiments  |                      |
| 2. Consider ONLY if disease. Considerate Office health and are a considerate of the second of the se |                      |
| 9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH  |                      |
|  |                      |
| Date Payee name  |                      |
| 10/26/2024 Starbucks Store   |                      |
| Amount (\$) Payee address; City; State; Zip Code   |                      |
| \$18.70 1935 SW Military   |                      |
|  |                      |
| San Antonio, TX 78221  |                      |
| PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description   |                      |
| OF EXPENDITURE Food/Beverage Expense   |                      |
| Check if Austin, TX, officeholder living expense Campaign Refreshments   | 2                    |
| Campaign Reliestiments   |                      |
| Occupated ONLY if street Constituted Office health and are a constituted of the health   |                      |
| Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH  |                      |
|  |                      |
| Date Payee name  |                      |
| 10/14/2024 Starbucks   |                      |
| Amount (\$) Payee address; City; State; Zip Code   |                      |
| \$20.43 8151 Pat Booker Rd   |                      |
|  |                      |
|  |                      |
| San Antonio, TX 78233  |                      |
| PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description   |                      |
| PURPOSE OF FOOd/Beverage Expense  (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description Check if travel outside of Texas. Complete Sch   |                      |
| PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description Check if travel outside of Texas. Complete Sch   |                      |
| PURPOSE OF FOOd/Beverage Expense  (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description Check if travel outside of Texas. Complete Sch   |                      |
| PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description Check if travel outside of Texas. Complete Schedule) Check if Austin, TX, officeholder living expense Campaign Refreshments  |                      |
| PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description Check if travel outside of Texas. Complete Schedule) Check if Austin, TX, officeholder living expense Campaign Refreshments  Complete ONLY if direct Candidate/Officeholder name Office sought Office held   |                      |
| PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description Check if travel outside of Texas. Complete Schedule) Check if Austin, TX, officeholder living expense Campaign Refreshments  |                      |
| PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description Check if travel outside of Texas. Complete Schedule) Check if Austin, TX, officeholder living expense Campaign Refreshments  Complete ONLY if direct Candidate/Officeholder name Office sought Office held   |                      |

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

|          | Contributions/ Donations Made By<br>Candidate/Officeholder/Politica<br>Credit Card Payment |  |   |
|----------|--|--|---|
| _        | Total marca Cabadula E1.   |  |   |
| 1        | Total pages Schedule F1:   |  | , |
|          | Sch: 47/55 Rpt:  | ·  |   |
| 4        | Date   | 5 Payee name   |   |
|          | 10/22/2024   | Starbucks  |   |
| 6        | Amount (\$)  | 7 Payee address; City; State; Zip Code   |   |
|          | \$8.31   | 8151 Pat Booker Rd   |   |
|          |  |  |   |
|          |  | Live Oak, TX 78233   |   |
| 8        | PURPOSE  |  |   |
| ١        | OF   | (a) Category (See Categories listed at the top of this schedule)  Food/Beverage Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T. |   |
|          | EXPENDITURE  | Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense                                   |   |
|          |  | Campaign Refreshments  |   |
|          |  |  |   |
| 9        | Complete ONLY if direct  | Candidate/Officeholder name Office sought Office held  |   |
|          | expenditure to benefit C/OI  | Н  |   |
| <b>—</b> | Date   | Payee name   | _ |
|          | 10/21/2024   | Subway   |   |
|          |  |  |   |
|          | Amount (\$)  | Payee address; City; State; Zip Code   |   |
|          | \$23.29  | 14084 Nacogdoches  |   |
|          |  |  |   |
|          |  | San Antonio, TX 78247  |   |
|          | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description   |   |
|          | OF<br>EXPENDITURE  | Food/Beverage Expense  |   |
|          | LAFENDITORE  | Check if Austin, TX, officeholder living expense   |   |
|          |  | Field Campaign Refreshments  |   |
|          |  |  |   |
|          | Complete <u>ONLY</u> if direct expenditure to benefit C/OI                                 | Candidate/Officeholder name Office sought Office held  |   |
|          | experiantare to benefit Great  |  |   |
|          | Date   | Payee name   |   |
|          | 10/21/2024   | Subway   |   |
|          | Amount (\$)  | Payee address; City; State; Zip Code   |   |
|          | \$2.70   | 14084 Nacogdoches  |   |
|          |  |  |   |
|          |  | San Antonio, TX 78247  |   |
| -        | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description   |   |
|          | OF   | Food/Beverage Expense  Check if travel outside of Texas. Complete Schedule T.  |   |
|          | EXPENDITURE  | Check if Austin, TX, officeholder living expense   |   |
|          |  | Field Campaign Refreshments  |   |
|          |  |  |   |
|          | Complete ONLY if direct  | Candidate/Officeholder name Office sought Office held  |   |
|          | expenditure to benefit C/OI  | H  |   |
|          |  |  |   |
|          |  |  |   |
|          |  |  |   |

### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee Fees Gift/Awards/Memorials Expense Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Event Expense Food/Beverage Expense Polling Expense

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

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)

|   | Credit Card Payment                                 | The Instruction Guide explains how to complete this form.                        |  |
|---|---|--|--|
| 1 | Total pages Schedule F1:                            | 2 FILER NAME   | 3 Filer ID (Ethics Commission Filers)  |
|   | Sch: 48/55 Rpt:                                     | Carranza, Kristian   | 00087920   |
| 4 | Date  | 5 Payee name   | •  |
|   | 10/21/2024  | Subway   |  |
| 6 | Amount (\$)   | 7 Payee address; City; State; Zip Code   |  |
|   | \$1.93  | 14084 Nacogdoches  |  |
|   |   |  |  |
|   |   | San Antonio, TX 78247  |  |
| 8 | PURPOSE   | (a) Category (See Categories listed at the top of this schedule) (b) Description |  |
|   | OF<br>EXPENDITURE                                   | · · · · · · · · · · · · · · · · · · ·  | l outside of Texas. Complete Schedule T.                                       |
|   | EXPENDITORE   |  | n, TX, officeholder living expense   |
|   |   | Field Campa  | aign Refreshments  |
| _ | Operation ONE V. C. F.                              | Occident Office helder research  | Office hald  |
| 9 | Complete ONLY if direct expenditure to benefit C/O  | Candidate/Officeholder name Office sought  | Office held  |
|   | · .   |  |  |
|   | Date  | Payee name   |  |
|   | 10/23/2024  | Subway   |  |
|   | Amount (\$)   | Payee address; City; State; Zip Code   |  |
|   | \$33.05   | 14084 Nacogdoches  |  |
|   |   |  |  |
|   |   | San Antonio, TX 78247  |  |
|   | PURPOSE   | (a) Category (See Categories listed at the top of this schedule) (b) Description |  |
|   | OF<br>EXPENDITURE                                   | 1 00d/Develage Expense   | l outside of Texas. Complete Schedule T.<br>n, TX, officeholder living expense |
|   |   | H  | aign Refreshments  |
|   |   |  |  |
|   | Complete ONLY if direct                             | Candidate/Officeholder name Office sought  | Office held  |
|   | expenditure to benefit C/O                          |  |  |
|   | Date  | Payee name   |  |
|   | 10/23/2024  | Subway   |  |
|   | Amount (\$)   | Payee address; City; State; Zip Code   |  |
|   | \$4.42  | 14084 Nacogdoches  |  |
|   | , <u>-</u>  | •  |  |
|   |   | San Antonio, TX 78247  |  |
|   | PURPOSE   |  |  |
|   | OF  | ,  | I outside of Texas. Complete Schedule T.                                       |
|   | EXPENDITURE   | Check if Austi   | n, TX, officeholder living expense   |
|   |   | Field Campa  | aign Refreshments  |
|   |   |  |  |
|   | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought  | Office held  |
|   | experientare to beliefft C/Of                       | •  |  |
|   |   |  |  |
|   |   |  |  |

#### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

|          | Candidate/Officeholder/Politica<br>Credit Card Payment | d Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.                        |
|----------|--|--|
| 1        | Total pages Schedule F1:                               | 2 FILER NAME 3 Filer ID (Ethics Commission Filers)   |
|          | Sch: 50/55 Rpt:  | Carranza, Kristian 00087920  |
| 4        | Date   | 5 Payee name   |
|          | 10/21/2024   | Texas Democratic Party   |
| 6        | Amount (\$)  | 7 Payee address; City; State; Zip Code   |
|          | \$40,000.00  | 314 E Highland Mall Blvd   |
|          |  |  |
|          |  | Austin, TX 78752   |
| 8        | PURPOSE<br>OF  | (a) Category (See Categories listed at the top of this schedule) (b) Description   |
|          | EXPENDITURE  | Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense |
|          |  | Contribution   |
|          |  |  |
| 9        | Complete ONLY if direct                                | Candidate/Officeholder name Office sought Office held  |
|          | expenditure to benefit C/Ol                            | H  |
|          | Date   | Payee name   |
|          | 10/11/2024   | Texas HDCC   |
| H        | Amount (\$)  | Payee address; City; State; Zip Code   |
|          | \$5,000.00   | PO Box 300095  |
|          |  |  |
|          |  | Austin, TX 78703   |
|          | PURPOSE<br>OF  | (a) Category (See Categories listed at the top of this schedule) (b) Description   |
|          | EXPENDITURE  | Polling Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense   |
|          |  | Polling  |
|          |  |  |
| Г        | Complete ONLY if direct                                | Candidate/Officeholder name Office sought Office held  |
|          | expenditure to benefit C/O                             | H  |
| F        | Date   | Payee name   |
|          | 09/29/2024   | The Texan  |
| H        | Amount (\$)  | Payee address; City; State; Zip Code   |
|          | \$20.23  | 25 N Kessler   |
|          |  |  |
|          |  | Schulenberg, TX 78956  |
|          | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description   |
|          | OF<br>EXPENDITURE                                      | Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.   |
|          |  | Check if Austin, TX, officeholder living expense  Campaign Meal  |
|          |  | Campaign wear  |
| $\vdash$ | Complete ONLY if direct                                | Candidate/Officeholder name Office sought Office held  |
|          | expenditure to benefit C/Ol                            |  |
| $\vdash$ |  |  |
|          |  |  |
|          |  |  |

#### SCHEDULE F1

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

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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)

|   | Credit Card Payment         | The Instruction Guide explains how to complete this form.   |
|---|-----------------------------|---|
| 1 | Total pages Schedule F1:    | 2 FILER NAME 3 Filer ID (Ethics Commission Filers)  |
|   | Sch: 51/55 Rpt:             | Carranza, Kristian 00087920   |
| 4 | Date                        | 5 Payee name  |
|   | 10/20/2024                  | Threading Plus  |
| 6 | Amount (\$)                 | 7 Payee address; City; State; Zip Code  |
|   | \$45.75                     | 2310 SW Military Dr   |
|   |                             |   |
|   |                             | San Antonio, TX 78224   |
| 8 | PURPOSE<br>OF               | (a) Category (See Categories listed at the top of this schedule) (b) Description  |
|   | EXPENDITURE                 | Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense |
|   |                             | Event Prep  |
|   |                             |   |
| 9 | Complete ONLY if direct     | Candidate/Officeholder name Office sought Office held   |
|   | expenditure to benefit C/OI | 1   |
|   | Date                        | Payee name  |
|   | 10/01/2024                  | Tito's Restaurant   |
|   | Amount (\$)                 | Payee address; City; State; Zip Code  |
|   | \$14.12                     | 955 S Alamo St  |
|   |                             |   |
|   |                             | San Antonio, TX 78205   |
|   | PURPOSE<br>OF               | (a) Category (See Categories listed at the top of this schedule) (b) Description  |
|   | EXPENDITURE                 | Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense            |
|   |                             | Campaign Refreshments   |
|   |                             |   |
|   | Complete ONLY if direct     | Candidate/Officeholder name Office sought Office held   |
|   | expenditure to benefit C/OI | 1   |
|   | Date                        | Payee name  |
|   | 10/21/2024                  | Tito's Restaurant   |
|   | Amount (\$)                 | Payee address; City; State; Zip Code  |
|   | \$60.85                     | 955 S Alamo St  |
|   |                             |   |
|   |                             | San Antonio, TX 78205   |
|   | PURPOSE<br>OF               | (a) Category (See Categories listed at the top of this schedule) (b) Description  |
|   | EXPENDITURE                 | Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense            |
|   |                             | Campaign Refreshments   |
|   |                             |   |
|   | Complete ONLY if direct     | Candidate/Officeholder name Office sought Office held   |
|   | expenditure to benefit C/OI | 1   |
|   |                             |   |
|   |                             |   |

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

|          | Contributions/ Donations Made By<br>Candidate/Officeholder/Politica<br>Credit Card Payment |  |
|----------|--|--|
| 1        | Total pages Schedule F1:   | 2 FILER NAME 3 Filer ID (Ethics Commission Filers)   |
| •        | Sch: 52/55 Rpt:  | Carranza, Kristian 00087920  |
| Ļ        | •  |  |
| 4        | Date   | 5 Payee name   |
| L        | 10/21/2024   | Tito's Restaurant  |
| 6        | Amount (\$)  | 7 Payee address; City; State; Zip Code   |
|          | \$50.06  | 955 S Alamo St   |
|          |  |  |
|          |  | San Antonio, TX 78205  |
| _        | DUDDOCE  |  |
| 8        | PURPOSE<br>OF  | (a) Category (See Categories listed at the top of this schedule)  FOOD/Beverage Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T. |
|          | EXPENDITURE  | Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense                                   |
|          |  | Campaign Refreshments  |
|          |  |  |
| 9        | Complete ONLY if direct  | Candidate/Officeholder name Office sought Office held  |
| 9        | expenditure to benefit C/O   |  |
| L        |  |  |
|          | Date   | Payee name   |
|          | 10/17/2024   | United States Postal Service   |
|          | Amount (\$)  | Payee address; City; State; Zip Code   |
|          | \$219.00   | 1140 S Laredo St   |
|          |  |  |
|          |  | San Antonio, TX 78204  |
|          | DUDDOCE  |  |
|          | PURPOSE<br>OF  | (a) Category (See Categories listed at the top of this schedule)  Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.   |
|          | EXPENDITURE  | Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense                                     |
|          |  | Postage  |
|          |  |  |
| $\vdash$ | Complete ONLY if direct  | Candidate/Officeholder name Office sought Office held  |
|          | expenditure to benefit C/O   | · · · · · · · · · · · · · · · · · · ·  |
| _        |  |  |
|          | Date   | Payee name   |
| L        | 10/19/2024   | United States Postal Service   |
|          | Amount (\$)  | Payee address; City; State; Zip Code   |
|          | \$292.00   | 7411 Barlite Blvd  |
|          |  |  |
|          |  | San Antonio, TX 78224  |
|          | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description   |
|          | OF   | Advertising Expense  Check if travel outside of Texas. Complete Schedule T.  |
|          | EXPENDITURE  | Check if Austin, TX, officeholder living expense   |
|          |  | Postage Postage  |
|          |  |  |
|          | Complete ONLY if direct  | Candidate/Officeholder name Office sought Office held  |
|          | expenditure to benefit C/OI  | <del>1</del>   |
|          |  |  |
|          |  |  |
|          |  |  |

### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor

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

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

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees
Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

|   | Contributions/ Donations Made By<br>Candidate/Officeholder/Politica<br>Credit Card Payment | Committee   Legal Services   Salaries/Wages/Contract Labor   OTHER (enter a category not listed above)   |
|---|--|--|
| 1 | Total pages Schedule F1:   | 2 FILER NAME 3 Filer ID (Ethics Commission Filers)   |
|   | Sch: 54/55 Rpt:  | Carranza, Kristian 00087920  |
| 4 | Date   | 5 Payee name   |
|   | 10/11/2024   | WalMart  |
| 6 | Amount (\$)  | 7 Payee address; City; State; Zip Code   |
|   | \$12.82  | 1200 SE Military   |
|   |  |  |
|   |  | San Antonio, TX 78214  |
| 8 | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description   |
|   | OF<br>EXPENDITURE  | Office Overhead/Rental Expense   Check if travel outside of Texas. Complete Schedule T.  |
|   | EXI ENDITORE   | Check if Austin, TX, officeholder living expense   |
|   |  | Office Supplies  |
|   | Complete ONLY if direct  | Candidate/Officeholder name Office sought Office hold  |
| 9 | expenditure to benefit C/O   | Candidate/Officeholder name Office sought Office held  |
|   | Date   | Payee name   |
|   | 10/15/2024   | WalMart  |
|   | Amount (\$)  | Payee address; City; State; Zip Code   |
|   | \$21.97  | 1200 SE Military   |
|   |  |  |
|   |  | San Antonio, TX 78214  |
|   | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description   |
|   | OF<br>EXPENDITURE  | Office Overhead/Rental Expense   Check if travel outside of Texas. Complete Schedule T.  |
|   | EXI ENDITORE   | Check if Austin, TX, officeholder living expense   |
|   |  | Office Supplies  |
| _ | Complete ONLY if direct  | Candidate/Officeholder name Office sought Office held  |
|   | expenditure to benefit C/O   |  |
| _ | Data   | Para a sana  |
|   | Date<br>10/17/2024   | Payee name<br>WalMart  |
|   |  |  |
|   | Amount (\$)  | Payee address; City; State; Zip Code   |
|   | \$18.38  | 1200 SE Military   |
|   |  | San Antonio, TX 78214  |
|   | PURPOSE  |  |
|   | OF   | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T. |
|   | EXPENDITURE  | Check if Austin, TX, officeholder living expense   |
|   |  | Office Supplies  |
|   |  |  |
|   | Complete ONLY if direct expenditure to benefit C/OI  | Candidate/Officeholder name Office sought Office held  |
|   | CAPETIGITUTE TO DETICITE C/OF  | '  |
|   |  |  |
|   |  |  |

#### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

|   | Candidate/Officeholder/Politica<br>Credit Card Payment | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form. |
|---|--|---|
| 1 | Total pages Schedule F1:                               | 2 FILER NAME 3 Filer ID (Ethics Commission Filers)  |
|   | Sch: 55/55 Rpt:  | Carranza, Kristian 00087920   |
| 4 | Date   | 5 Payee name  |
|   | 10/19/2024   | WalMart   |
| 6 | Amount (\$)  | 7 Payee address; City; State; Zip Code  |
|   | \$41.14  | 1200 SE Military  |
|   |  |   |
|   |  | San Antonio, TX 78214   |
| 8 | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description  |
|   | OF<br>EXPENDITURE                                      | Office Overhead/Rental Expense  |
|   | -  | Check if Austin, TX, officeholder living expense Office Supplies  |
|   |  | Office Supplies   |
| 9 | Complete ONLY if direct                                | Candidate/Officeholder name Office sought Office held   |
| ľ | expenditure to benefit C/OI                            |   |
| F | Date   | Payee name  |
|   | 10/20/2024   | WalMart   |
| ┝ | Amount (\$)  | Payee address; City; State; Zip Code  |
|   | \$219.75   | 1200 SE Military  |
|   | ,  | ,   |
|   |  | San Antonio, TX 78214   |
|   | PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description  |
|   | OF<br>EXPENDITURE                                      | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense                       |
|   |  | Field Supplies  |
|   |  | The supplies  |
| ⊢ | Complete ONLY if direct                                | Candidate/Officeholder name Office sought Office held   |
|   | expenditure to benefit C/OI                            |   |
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# INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 157/157 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Carranza, Kristian 00087920 8 Amount (\$) Date 5 Name of person from whom amount is received 09/30/2024 \$20.63 CreditHuman 6 Address of person from whom amount is received; City; State; Zip Code San Antonio, TX 78295 Purpose for which amount is received Check if political contribution returned to filer Interest/Dividend from checking account