

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00068897	2 Total pages filed: 173
3 COMMITTEE NAME Battleground Texas		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 10/28/2024	
		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 11525 Austin, TX 78711		
	5 CAMPAIGN TREASURER NAME MS / MRS / MR FIRST MI Ms. Jennifer NICKNAME LAST SUFFIX Brown		
6 CAMPAIGN TREASURER STREET ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE PO Box 11525 Austin, TX 78711		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 11525 Austin, TX 78711		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 270-0583		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year 07/01/2024 10/26/2024		
11 ELECTION	ELECTION DATE Month Day Year 11/05/2024	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Battleground Texas	13 Filer ID (Ethics Commission Filers) 00068897
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Kristian Carranza State Representative
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 45,319.32
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 458.56
	4. TOTAL POLITICAL EXPENDITURES	\$ 96,999.29
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 62,480.48
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 AFFIDAVIT

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

Ms. Jennifer Brown

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
ADDENDUM

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12 COMMITTEE NAME Battleground Texas		13 Filer ID (Ethics Commission Filers) 00068897
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Laurel Jordan Jordan Swift State Representative
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Averie Bishop State Representative
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Annette Ramirez Harris County Tax Assessor
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

SUBTOTALS - GPAC

17 COMMITTEE NAME Battleground Texas		18 Filer ID (Ethics Commission Filers) 00068897
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 45,319.32
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 88,072.29
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 8,927.00
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 3,967.57

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/120 Rpt: 5/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albro, Katherine <hr/> 6 Contributor address; City; State; Zip Code Harwich, MA 02645	7 Amount of Contribution (\$) \$1.92
8 Principal occupation / Job title (See Instructions) Chef		9 Employer (See Instructions)
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albro, Katherine <hr/> Contributor address; City; State; Zip Code Harwich, MA 02645	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Chef		Employer (See Instructions)
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albro, Katherine <hr/> Contributor address; City; State; Zip Code Harwich, MA 02645	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Chef		Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albro, Katherine <hr/> Contributor address; City; State; Zip Code Harwich, MA 02645	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Chef		Employer (See Instructions)
Date 07/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alex, Sheela <hr/> Contributor address; City; State; Zip Code Encinitas, CA 92024	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/120 Rpt: 6/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alex, Sheela	7 Amount of Contribution (\$) \$3.12
6 Contributor address; City; State; Zip Code Encinitas, CA 92024		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alex, Sheela	Amount of Contribution (\$) \$3.12
Contributor address; City; State; Zip Code Encinitas, CA 92024		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alex, Sheela	Amount of Contribution (\$) \$3.12
Contributor address; City; State; Zip Code Encinitas, CA 92024		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baedeker, Laura	Amount of Contribution (\$) \$1.92
Contributor address; City; State; Zip Code Oakland, CA 94611		
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions)
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baedeker, Laura	Amount of Contribution (\$) \$1.92
Contributor address; City; State; Zip Code Oakland, CA 94611		
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/120 Rpt: 7/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baedeker, Laura <hr/> 6 Contributor address; City; State; Zip Code Oakland, CA 94611	7 Amount of Contribution (\$) \$1.92
8 Principal occupation / Job title (See Instructions) Writer		9 Employer (See Instructions)
Date 10/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baedeker, Laura <hr/> Contributor address; City; State; Zip Code Oakland, CA 94611	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions)
Date 10/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Balik, Reuben <hr/> Contributor address; City; State; Zip Code Chicago, IL 60646	Amount of Contribution (\$) \$1.75
Principal occupation / Job title (See Instructions) CTO		Employer (See Instructions)
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baxter, Kathleen <hr/> Contributor address; City; State; Zip Code Oakland, CA 94618	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Technical Recruiter		Employer (See Instructions)
Date 07/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bellotto, Rebecca <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90026	Amount of Contribution (\$) \$2.27
Principal occupation / Job title (See Instructions) TV Writer		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/120 Rpt: 8/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bellotto, Rebecca	7 Amount of Contribution (\$) \$2.27
6 Contributor address; City; State; Zip Code Los Angeles, CA 90026		
8 Principal occupation / Job title (See Instructions) TV Writer		9 Employer (See Instructions)
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bellotto, Rebecca	Amount of Contribution (\$) \$2.27
Contributor address; City; State; Zip Code Los Angeles, CA 90026		
Principal occupation / Job title (See Instructions) TV Writer		Employer (See Instructions)
Date 10/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bellotto, Rebecca	Amount of Contribution (\$) \$2.27
Contributor address; City; State; Zip Code Los Angeles, CA 90026		
Principal occupation / Job title (See Instructions) TV Writer		Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benitez, Brian	Amount of Contribution (\$) \$1.79
Contributor address; City; State; Zip Code Yonkers, NY 10704		
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions)
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bereuter, Margo	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Stafford, VA 22554		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/120 Rpt: 9/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bickler, Deana <hr/> 6 Contributor address; City; State; Zip Code Las Vegas, NV 89144	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Sales Representative		9 Employer (See Instructions)
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bierly, Phoebe <hr/> Contributor address; City; State; Zip Code Washington, DC 20003	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) International development		Employer (See Instructions)
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bierly, Phoebe <hr/> Contributor address; City; State; Zip Code Washington, DC 20003	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) International development		Employer (See Instructions)
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bierly, Phoebe <hr/> Contributor address; City; State; Zip Code Washington, DC 20003	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) International development		Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bierly, Phoebe <hr/> Contributor address; City; State; Zip Code Washington, DC 20003	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) International development		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/120 Rpt: 10/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bigham, Cindy <hr/> 6 Contributor address; City; State; Zip Code Plano, TX 75074	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bigham, Cindy <hr/> Contributor address; City; State; Zip Code Plano, TX 75074	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bigham, Cindy <hr/> Contributor address; City; State; Zip Code Plano, TX 75074	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolden, Ada <hr/> Contributor address; City; State; Zip Code Houston, TX 77033	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolden, Ada <hr/> Contributor address; City; State; Zip Code Houston, TX 77033	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/120 Rpt: 11/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolden, Ada	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Houston, TX 77033		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolden, Ada	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Houston, TX 77033		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 07/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boles, Chase	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Austin, TX 78741		
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions)
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boles, Chase	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Austin, TX 78741		
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions)
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boles, Chase	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Austin, TX 78741		
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/120 Rpt: 12/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boles, Chase <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78741	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Accountant		9 Employer (See Instructions)
Date 07/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bordow, Alissa <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94117	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Dentist		Employer (See Instructions)
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bordow, Alissa <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94117	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Dentist		Employer (See Instructions)
Date 09/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bordow, Alissa <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94117	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Dentist		Employer (See Instructions)
Date 10/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bordow, Alissa <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94117	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Dentist		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/120 Rpt: 13/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Randy	7 Amount of Contribution (\$) \$4.46
6 Contributor address; City; State; Zip Code Destin, FL 32541		
8 Principal occupation / Job title (See Instructions) Program manager		9 Employer (See Instructions)
Date 07/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Houston, TX 77005		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Houston, TX 77005		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Houston, TX 77005		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 10/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brownscombe, Tom	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Houston, TX 77005		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/120 Rpt: 14/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant, Steven <hr/> 6 Contributor address; City; State; Zip Code Durham, NC 27712	7 Amount of Contribution (\$) \$4.46
8 Principal occupation / Job title (See Instructions) Composer		9 Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Busch, Laura <hr/> Contributor address; City; State; Zip Code ROCHESTER HILLS, MI 48306	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C BUERGLER, STEPHEN <hr/> Contributor address; City; State; Zip Code Raymore, MO 64083	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carney, Sarah <hr/> Contributor address; City; State; Zip Code Jersey City, NJ 07307	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Media & Advertising		Employer (See Instructions)
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carney, Sarah <hr/> Contributor address; City; State; Zip Code Jersey City, NJ 07307	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Media & Advertising		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/120 Rpt: 15/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carney, Sarah <hr/> 6 Contributor address; City; State; Zip Code Jersey City, NJ 07307	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Media & Advertising		9 Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carney, Sarah <hr/> Contributor address; City; State; Zip Code Jersey City, NJ 07307	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Media & Advertising		Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carson, Doug <hr/> Contributor address; City; State; Zip Code Jackson, CA 95642	Amount of Contribution (\$) \$1.79
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Margaret <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209	Amount of Contribution (\$) \$4,000.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 07/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cato, Mary <hr/> Contributor address; City; State; Zip Code Arlington, TX 76012	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/120 Rpt: 16/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cato, Mary <hr/> 6 Contributor address; City; State; Zip Code Arlington, TX 76012	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cato, Mary <hr/> Contributor address; City; State; Zip Code Arlington, TX 76012	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 10/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cato, Mary <hr/> Contributor address; City; State; Zip Code Arlington, TX 76012	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chan, Colleen <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94107	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Business		Employer (See Instructions)
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chan, Colleen <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94107	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Business		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/120 Rpt: 17/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapman, Ally	7 Amount of Contribution (\$) \$2.50
6 Contributor address; City; State; Zip Code Brooklyn, NY 11216		
8 Principal occupation / Job title (See Instructions) Brand Strategist		9 Employer (See Instructions)
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapman, Ally	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Brooklyn, NY 11216		
Principal occupation / Job title (See Instructions) Brand Strategist		Employer (See Instructions)
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapman, Ally	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Brooklyn, NY 11216		
Principal occupation / Job title (See Instructions) Brand Strategist		Employer (See Instructions)
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapman, Ally	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Brooklyn, NY 11216		
Principal occupation / Job title (See Instructions) Brand Strategist		Employer (See Instructions)
Date 07/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chen, Austin	Amount of Contribution (\$) \$3.85
Contributor address; City; State; Zip Code SEATTLE, WA 98109		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/120 Rpt: 18/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chen, Austin <hr/> 6 Contributor address; City; State; Zip Code SEATTLE, WA 98109	7 Amount of Contribution (\$) \$3.85
8 Principal occupation / Job title (See Instructions) Software Engineer		9 Employer (See Instructions)
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chen, Austin <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98109	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions)
Date 10/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chen, Mike <hr/> Contributor address; City; State; Zip Code East Palo Alto, CA 94303	Amount of Contribution (\$) \$1.79
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions)
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chiera, Laura <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94112	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions)
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chiera, Laura <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94112	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/120 Rpt: 19/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chiera, Laura <hr/> 6 Contributor address; City; State; Zip Code San Francisco, CA 94112	7 Amount of Contribution (\$) \$1.92
8 Principal occupation / Job title (See Instructions) Executive Director		9 Employer (See Instructions)
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clay, Kimberly <hr/> Contributor address; City; State; Zip Code New York, NY 10027	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Law Graduate		Employer (See Instructions)
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clay, Kimberly <hr/> Contributor address; City; State; Zip Code New York, NY 10027	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Law Graduate		Employer (See Instructions)
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clay, Kimberly <hr/> Contributor address; City; State; Zip Code New York, NY 10027	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Law Graduate		Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clay, Kimberly <hr/> Contributor address; City; State; Zip Code New York, NY 10027	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Law Graduate		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/120 Rpt: 20/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cloghessy, Mark <hr/> 6 Contributor address; City; State; Zip Code Western Springs, IL 60558-1445	7 Amount of Contribution (\$) \$1.75
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 07/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colyer, Janine <hr/> Contributor address; City; State; Zip Code Maplewood, NJ 07040	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Legal business development manager		Employer (See Instructions)
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colyer, Janine <hr/> Contributor address; City; State; Zip Code Maplewood, NJ 07040	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Legal business development manager		Employer (See Instructions)
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colyer, Janine <hr/> Contributor address; City; State; Zip Code Maplewood, NJ 07040	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Legal business development manager		Employer (See Instructions)
Date 07/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crass, Kevin <hr/> Contributor address; City; State; Zip Code Humble, TX 77339	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Safety Manager		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/120 Rpt: 21/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crass, Kevin <hr/> 6 Contributor address; City; State; Zip Code Humble, TX 77339	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Safety Manager		9 Employer (See Instructions)
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crass, Kevin <hr/> Contributor address; City; State; Zip Code Humble, TX 77339	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Safety Manager		Employer (See Instructions)
Date 10/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crass, Kevin <hr/> Contributor address; City; State; Zip Code Humble, TX 77339	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Safety Manager		Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Czajka, Eleanor <hr/> Contributor address; City; State; Zip Code Grand Prairie, TX 75050	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Payroll Clerk		Employer (See Instructions)
Date 07/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DYER, Alison <hr/> Contributor address; City; State; Zip Code Colbert, WA 99005	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/120 Rpt: 22/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DYER, Alison <hr/> 6 Contributor address; City; State; Zip Code Colbert, WA 99005	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DYER, Alison <hr/> Contributor address; City; State; Zip Code Colbert, WA 99005	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DYER, Alison <hr/> Contributor address; City; State; Zip Code Colbert, WA 99005	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DYER, Alison <hr/> Contributor address; City; State; Zip Code Colbert, WA 99005	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DYER, Alison <hr/> Contributor address; City; State; Zip Code Colbert, WA 99005	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/120 Rpt: 23/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DYER, Alison	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code Colbert, WA 99005		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DYER, Alison	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Colbert, WA 99005		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davies, Janice	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Ashburn, VA 20147		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Rebecca A.	Amount of Contribution (\$) \$1.15
Contributor address; City; State; Zip Code Norman, OK 73069		
Principal occupation / Job title (See Instructions) Program Specialist		Employer (See Instructions)
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Rebecca A.	Amount of Contribution (\$) \$1.15
Contributor address; City; State; Zip Code Norman, OK 73069		
Principal occupation / Job title (See Instructions) Program Specialist		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/120 Rpt: 24/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Rebecca A.	7 Amount of Contribution (\$) \$1.15
	6 Contributor address; City; State; Zip Code Norman, OK 73069	
8 Principal occupation / Job title (See Instructions) Program Specialist		9 Employer (See Instructions)
Date 10/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Rebecca A.	Amount of Contribution (\$) \$1.15
	Contributor address; City; State; Zip Code Norman, OK 73069	
Principal occupation / Job title (See Instructions) Program Specialist		Employer (See Instructions)
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawson, Tiffany	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Houston, TX 77006	
Principal occupation / Job title (See Instructions) Professional services		Employer (See Instructions)
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeBor, Lianna	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Roslindale, MA 02131	
Principal occupation / Job title (See Instructions) Operations Manager		Employer (See Instructions)
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeBor, Lianna	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Roslindale, MA 02131	
Principal occupation / Job title (See Instructions) Operations Manager		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/120 Rpt: 25/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeBor, Lianna <hr/> 6 Contributor address; City; State; Zip Code Roslindale, MA 02131	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Operations Manager		9 Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeBor, Lianna <hr/> Contributor address; City; State; Zip Code Roslindale, MA 02131	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Operations Manager		Employer (See Instructions)
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deane, Alexis <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90026	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions)
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deane, Alexis <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90026	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions)
Date 10/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Depowski, Kris <hr/> Contributor address; City; State; Zip Code Buffalo, NY 14228	Amount of Contribution (\$) \$1.75
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/120 Rpt: 26/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doctor, Jason	7 Amount of Contribution (\$) \$1.79
6 Contributor address; City; State; Zip Code Seattle, WA 98103		
8 Principal occupation / Job title (See Instructions) Pharma		9 Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donovan, Ryan	Amount of Contribution (\$) \$17.86
Contributor address; City; State; Zip Code NEW YORK, NY 10014-0844		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Douglas, Michael	Amount of Contribution (\$) \$1.92
Contributor address; City; State; Zip Code Wayland, MA 01778		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Douglas, Michael	Amount of Contribution (\$) \$1.92
Contributor address; City; State; Zip Code Wayland, MA 01778		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Douglas, Michael	Amount of Contribution (\$) \$1.92
Contributor address; City; State; Zip Code Wayland, MA 01778		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/120 Rpt: 27/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doyle, Nina	7 Amount of Contribution (\$) \$1.92
6 Contributor address; City; State; Zip Code Astoria, NY 11105		
8 Principal occupation / Job title (See Instructions) Production artist		9 Employer (See Instructions)
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doyle, Nina	Amount of Contribution (\$) \$1.92
Contributor address; City; State; Zip Code Astoria, NY 11105		
Principal occupation / Job title (See Instructions) Production artist		Employer (See Instructions)
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doyle, Nina	Amount of Contribution (\$) \$1.92
Contributor address; City; State; Zip Code Astoria, NY 11105		
Principal occupation / Job title (See Instructions) Production artist		Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doyle, Nina	Amount of Contribution (\$) \$1.92
Contributor address; City; State; Zip Code Astoria, NY 11105		
Principal occupation / Job title (See Instructions) Production artist		Employer (See Instructions)
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drake, Arlene	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Encino, CA 91436		
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/120 Rpt: 28/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drinkward, Lisa <hr/> 6 Contributor address; City; State; Zip Code St Helena, CA 94574	7 Amount of Contribution (\$) \$3.85
8 Principal occupation / Job title (See Instructions) Winemaker		9 Employer (See Instructions)
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drinkward, Lisa <hr/> Contributor address; City; State; Zip Code St Helena, CA 94574	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Winemaker		Employer (See Instructions)
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drinkward, Lisa <hr/> Contributor address; City; State; Zip Code St Helena, CA 94574	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Winemaker		Employer (See Instructions)
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drinkward, Lisa <hr/> Contributor address; City; State; Zip Code St Helena, CA 94574	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Winemaker		Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duffy, Tyler <hr/> Contributor address; City; State; Zip Code Birmingham, MI 48009	Amount of Contribution (\$) \$1.79
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/120 Rpt: 29/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunn, Theresa <hr/> 6 Contributor address; City; State; Zip Code Montpelier, VT 05602	7 Amount of Contribution (\$) \$1.92
8 Principal occupation / Job title (See Instructions) Project Manager		9 Employer (See Instructions)
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunn, Theresa <hr/> Contributor address; City; State; Zip Code Montpelier, VT 05602	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions)
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunn, Theresa <hr/> Contributor address; City; State; Zip Code Montpelier, VT 05602	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions)
Date 10/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edeli, David <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94114	Amount of Contribution (\$) \$1.79
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eppelsheimer, Lou <hr/> Contributor address; City; State; Zip Code Snowmass, CO 81654	Amount of Contribution (\$) \$1.79
Principal occupation / Job title (See Instructions) hotel		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/120 Rpt: 30/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eppelsheimer, Roy <hr/> 6 Contributor address; City; State; Zip Code Carbondale, CO 81623	7 Amount of Contribution (\$) \$1.79
8 Principal occupation / Job title (See Instructions) hotel		9 Employer (See Instructions)
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Esch, Eric <hr/> Contributor address; City; State; Zip Code Lancaster, PA 17601	Amount of Contribution (\$) \$2.27
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions)
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Esch, Eric <hr/> Contributor address; City; State; Zip Code Lancaster, PA 17601	Amount of Contribution (\$) \$2.27
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions)
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Esch, Eric <hr/> Contributor address; City; State; Zip Code Lancaster, PA 17601	Amount of Contribution (\$) \$2.27
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions)
Date 10/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Esch, Eric <hr/> Contributor address; City; State; Zip Code Lancaster, PA 17601	Amount of Contribution (\$) \$2.27
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/120 Rpt: 31/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eyler, Rebecca <hr/> 6 Contributor address; City; State; Zip Code Alexandria, VA 22310	7 Amount of Contribution (\$) \$8.33
8 Principal occupation / Job title (See Instructions) Writer		9 Employer (See Instructions)
Date 08/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eyler, Rebecca <hr/> Contributor address; City; State; Zip Code Alexandria, VA 22310	Amount of Contribution (\$) \$8.33
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions)
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eyler, Rebecca <hr/> Contributor address; City; State; Zip Code Alexandria, VA 22310	Amount of Contribution (\$) \$8.33
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions)
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eyler, Rebecca <hr/> Contributor address; City; State; Zip Code Alexandria, VA 22310	Amount of Contribution (\$) \$8.33
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions)
Date 07/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farver, Andrew <hr/> Contributor address; City; State; Zip Code Chicago, IL 60647	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Civil Engineer		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/120 Rpt: 32/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farver, Andrew <hr/> 6 Contributor address; City; State; Zip Code Chicago, IL 60647	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Civil Engineer		9 Employer (See Instructions)
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farver, Andrew <hr/> Contributor address; City; State; Zip Code Chicago, IL 60647	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Civil Engineer		Employer (See Instructions)
Date 10/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fine, Ben <hr/> Contributor address; City; State; Zip Code Manhattan, NY 10023	Amount of Contribution (\$) \$4.39
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fine, Michael <hr/> Contributor address; City; State; Zip Code Villanova, PA 19085	Amount of Contribution (\$) \$1.79
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Jonathan <hr/> Contributor address; City; State; Zip Code Belmont, CA 94002	Amount of Contribution (\$) \$1.79
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/120 Rpt: 33/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Lawrence <hr/> 6 Contributor address; City; State; Zip Code RICHMOND, VT 05477	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Software Engineer		9 Employer (See Instructions)
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Lawrence <hr/> Contributor address; City; State; Zip Code RICHMOND, VT 05477	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fitzpatrick, Eric <hr/> Contributor address; City; State; Zip Code Cary, NC 27513	Amount of Contribution (\$) \$1.79
Principal occupation / Job title (See Instructions) VP Solutions Engineering		Employer (See Instructions)
Date 10/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flynn, James R <hr/> Contributor address; City; State; Zip Code Seattle, WA 98133	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions)
Date 07/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flynn, Janet <hr/> Contributor address; City; State; Zip Code Magnolia, TX 77355	Amount of Contribution (\$) \$20.20
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/120 Rpt: 34/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flynn, Janet	7 Amount of Contribution (\$) \$20.20
	6 Contributor address; City; State; Zip Code Magnolia, TX 77355	
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flynn, Janet	Amount of Contribution (\$) \$20.20
	Contributor address; City; State; Zip Code Magnolia, TX 77355	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 10/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flynn, Janet	Amount of Contribution (\$) \$20.20
	Contributor address; City; State; Zip Code Magnolia, TX 77355	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foraker, John	Amount of Contribution (\$) \$17.86
	Contributor address; City; State; Zip Code Davis, CA 95616	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions)
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ford, Rosemary	Amount of Contribution (\$) \$1.92
	Contributor address; City; State; Zip Code West Richland, WA 99353	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/120 Rpt: 35/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ford, Rosemary <hr/> 6 Contributor address; City; State; Zip Code West Richland, WA 99353	7 Amount of Contribution (\$) \$1.92
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions)
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ford, Rosemary <hr/> Contributor address; City; State; Zip Code West Richland, WA 99353	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions)
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ford, Rosemary <hr/> Contributor address; City; State; Zip Code West Richland, WA 99353	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions)
Date 10/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fried, Kurt <hr/> Contributor address; City; State; Zip Code Oradell, NJ 07649	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Copywriter		Employer (See Instructions)
Date 07/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Alyson <hr/> Contributor address; City; State; Zip Code Bend, OR 97702	Amount of Contribution (\$) \$1.53
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/120 Rpt: 36/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Alyson <hr/> 6 Contributor address; City; State; Zip Code Bend, OR 97702	7 Amount of Contribution (\$) \$1.53
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions)
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Alyson <hr/> Contributor address; City; State; Zip Code Bend, OR 97702	Amount of Contribution (\$) \$1.53
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions)
Date 10/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Alyson <hr/> Contributor address; City; State; Zip Code Bend, OR 97702	Amount of Contribution (\$) \$1.53
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galloway, Toby <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76109	Amount of Contribution (\$) \$1.79
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 07/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Rene <hr/> Contributor address; City; State; Zip Code Strongsville, OH 44149	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/120 Rpt: 37/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Rene <hr/> 6 Contributor address; City; State; Zip Code Strongsville, OH 44149	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions)
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Rene <hr/> Contributor address; City; State; Zip Code Strongsville, OH 44149	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaylord, Jeremy <hr/> Contributor address; City; State; Zip Code New York, NY 10030	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 07/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geiger, Sona <hr/> Contributor address; City; State; Zip Code Playa del Rey, CA 90293	Amount of Contribution (\$) \$2.08
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions)
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geiger, Sona <hr/> Contributor address; City; State; Zip Code Playa del Rey, CA 90293	Amount of Contribution (\$) \$2.08
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/120 Rpt: 38/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geiger, Sona <hr/> 6 Contributor address; City; State; Zip Code Playa del Rey, CA 90293	7 Amount of Contribution (\$) \$2.08
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions)
Date 10/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geiger, Sona <hr/> Contributor address; City; State; Zip Code Playa del Rey, CA 90293	Amount of Contribution (\$) \$2.08
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions)
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerfers, Donna <hr/> Contributor address; City; State; Zip Code Austin, TX 78734	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerfers, Donna <hr/> Contributor address; City; State; Zip Code Austin, TX 78734	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerfers, Donna <hr/> Contributor address; City; State; Zip Code Austin, TX 78734	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/120 Rpt: 39/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glen, Kiranjit <hr/> 6 Contributor address; City; State; Zip Code Gulfport, FL 33707	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Jacob <hr/> Contributor address; City; State; Zip Code Vinton, VA 24179	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Database admin		Employer (See Instructions)
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graner, Brent <hr/> Contributor address; City; State; Zip Code Seattle, WA 98117	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Research physicist		Employer (See Instructions)
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graner, Brent <hr/> Contributor address; City; State; Zip Code Seattle, WA 98117	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Research physicist		Employer (See Instructions)
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graner, Brent <hr/> Contributor address; City; State; Zip Code Seattle, WA 98117	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Research physicist		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/120 Rpt: 40/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graner, Brent <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98117	7 Amount of Contribution (\$) \$3.85
8 Principal occupation / Job title (See Instructions) Research physicist		9 Employer (See Instructions)
Date 10/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gudger, Ken <hr/> Contributor address; City; State; Zip Code Ashland, OR 97520	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerra, Roberto <hr/> Contributor address; City; State; Zip Code Pittsburgh, PA 15235	Amount of Contribution (\$) \$2.27
Principal occupation / Job title (See Instructions) Research Assistant Professor		Employer (See Instructions)
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerra, Roberto <hr/> Contributor address; City; State; Zip Code Pittsburgh, PA 15235	Amount of Contribution (\$) \$2.27
Principal occupation / Job title (See Instructions) Research Assistant Professor		Employer (See Instructions)
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerra, Roberto <hr/> Contributor address; City; State; Zip Code Pittsburgh, PA 15235	Amount of Contribution (\$) \$2.27
Principal occupation / Job title (See Instructions) Research Assistant Professor		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/120 Rpt: 41/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerra, Roberto	7 Amount of Contribution (\$) \$2.27
6 Contributor address; City; State; Zip Code Pittsburgh, PA 15235		
8 Principal occupation / Job title (See Instructions) Research Assistant Professor		9 Employer (See Instructions)
Date 07/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haas, Debra	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78722		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haas, Debra	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78722		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haas, Debra	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78722		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 10/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haas, Debra	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Austin, TX 78722		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/120 Rpt: 42/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hallenbeck, Robert	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Houston, TX 77019	
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions)
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hallenbeck, Robert	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Houston, TX 77019	
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hallenbeck, Robert	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Houston, TX 77019	
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)
Date 10/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hallenbeck, Robert	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Houston, TX 77019	
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Halvorson, Jennifer	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Pasadena, TX 77506	
Principal occupation / Job title (See Instructions) accountant		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/120 Rpt: 43/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Halvorson, Jennifer <hr/> 6 Contributor address; City; State; Zip Code Pasadena, TX 77506	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) accountant		9 Employer (See Instructions)
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Halvorson, Jennifer <hr/> Contributor address; City; State; Zip Code Pasadena, TX 77506	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) accountant		Employer (See Instructions)
Date 10/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Halvorson, Jennifer <hr/> Contributor address; City; State; Zip Code Pasadena, TX 77506	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) accountant		Employer (See Instructions)
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haney, Colton <hr/> Contributor address; City; State; Zip Code Warrenton, VA 20186	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hansen, Kathryn <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/120 Rpt: 44/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Robert	7 Amount of Contribution (\$) \$4.46
6 Contributor address; City; State; Zip Code Boulder, CO 80308		
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions)
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawley, Ruth	Amount of Contribution (\$) \$3.85
Contributor address; City; State; Zip Code Livermore, CA 94550		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawley, Ruth	Amount of Contribution (\$) \$3.85
Contributor address; City; State; Zip Code Livermore, CA 94550		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawley, Ruth	Amount of Contribution (\$) \$3.85
Contributor address; City; State; Zip Code Livermore, CA 94550		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawley, Ruth	Amount of Contribution (\$) \$3.85
Contributor address; City; State; Zip Code Livermore, CA 94550		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/120 Rpt: 45/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henderson, Walt	7 Amount of Contribution (\$) \$4.46
6 Contributor address; City; State; Zip Code Solomons, MD 20688		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 07/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ho, Beata	Amount of Contribution (\$) \$3.85
Contributor address; City; State; Zip Code Charlotte, NC 28205		
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions)
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ho, Beata	Amount of Contribution (\$) \$3.85
Contributor address; City; State; Zip Code Charlotte, NC 28205		
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions)
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ho, Beata	Amount of Contribution (\$) \$3.85
Contributor address; City; State; Zip Code Charlotte, NC 28205		
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions)
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ho, Beata	Amount of Contribution (\$) \$3.85
Contributor address; City; State; Zip Code Charlotte, NC 28205		
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/120 Rpt: 46/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollmuller, Anne <hr/> 6 Contributor address; City; State; Zip Code Bayville, NY 11709	7 Amount of Contribution (\$) \$2.15
8 Principal occupation / Job title (See Instructions) Graduate Student		9 Employer (See Instructions)
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollmuller, Anne <hr/> Contributor address; City; State; Zip Code Bayville, NY 11709	Amount of Contribution (\$) \$2.15
Principal occupation / Job title (See Instructions) Graduate Student		Employer (See Instructions)
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollmuller, Anne <hr/> Contributor address; City; State; Zip Code Bayville, NY 11709	Amount of Contribution (\$) \$2.15
Principal occupation / Job title (See Instructions) Graduate Student		Employer (See Instructions)
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollmuller, Anne <hr/> Contributor address; City; State; Zip Code Bayville, NY 11709	Amount of Contribution (\$) \$2.15
Principal occupation / Job title (See Instructions) Graduate Student		Employer (See Instructions)
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houser, Derrick <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94117	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Chief Technology Officer		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/120 Rpt: 47/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houser, Derrick	7 Amount of Contribution (\$) \$1.92
6 Contributor address; City; State; Zip Code San Francisco, CA 94117		
8 Principal occupation / Job title (See Instructions) Chief Technology Officer		9 Employer (See Instructions)
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houser, Derrick	Amount of Contribution (\$) \$1.92
Contributor address; City; State; Zip Code San Francisco, CA 94117		
Principal occupation / Job title (See Instructions) Chief Technology Officer		Employer (See Instructions)
Date 07/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughey, Richard	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Dallas, TX 75230		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughey, Richard	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Dallas, TX 75230		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughey, Richard	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Dallas, TX 75230		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/120 Rpt: 48/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughey, Richard <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75230	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions)
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hulshouser-Bossert, Donna <hr/> Contributor address; City; State; Zip Code Elgin, TX 78621	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 07/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Insley, Matt <hr/> Contributor address; City; State; Zip Code Chicago, IL 60618	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Software Developer		Employer (See Instructions)
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Insley, Matt <hr/> Contributor address; City; State; Zip Code Chicago, IL 60618	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Software Developer		Employer (See Instructions)
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Insley, Matt <hr/> Contributor address; City; State; Zip Code Chicago, IL 60618	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Software Developer		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/120 Rpt: 49/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jane, Clark	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code Columbus, OH 43235		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jay, Jon	Amount of Contribution (\$) \$17.86
Contributor address; City; State; Zip Code Seattle, WA 98103		
Principal occupation / Job title (See Instructions) Software Manager		Employer (See Instructions)
Date 09/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jensen, Olaf	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Garland, TX 75040		
Principal occupation / Job title (See Instructions) Software development		Employer (See Instructions)
Date 10/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Mary Beth	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Palm City, FL 34990		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph, Raymond	Amount of Contribution (\$) \$1.79
Contributor address; City; State; Zip Code Jacksonville, FL 32217		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/120 Rpt: 50/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kasten, Nancy	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Dallas, TX 75229-5560		
8 Principal occupation / Job title (See Instructions) not employed		9 Employer (See Instructions)
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kasten, Nancy	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Dallas, TX 75229-5560		
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions)
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kasten, Nancy	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Dallas, TX 75229-5560		
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions)
Date 10/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kasten, Nancy	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Dallas, TX 75229-5560		
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions)
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keane, Mary Elizabeth	Amount of Contribution (\$) \$3.85
Contributor address; City; State; Zip Code Shorewood, WI 53211		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/120 Rpt: 51/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keane, Mary Elizabeth <hr/> 6 Contributor address; City; State; Zip Code Shorewood, WI 53211	7 Amount of Contribution (\$) \$3.85
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keane, Mary Elizabeth <hr/> Contributor address; City; State; Zip Code Shorewood, WI 53211	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keane, Mary Elizabeth <hr/> Contributor address; City; State; Zip Code Shorewood, WI 53211	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 10/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, Kay <hr/> Contributor address; City; State; Zip Code Birmingham, AL 35216	Amount of Contribution (\$) \$1.79
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 07/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenfield, Julie <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78212	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Airport planner		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/120 Rpt: 52/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenfield, Julie <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78212	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Airport planner		9 Employer (See Instructions)
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenfield, Julie <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78212	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Airport planner		Employer (See Instructions)
Date 10/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenfield, Julie <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78212	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Airport planner		Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Khan, Alex <hr/> Contributor address; City; State; Zip Code Sunnyside, NY 11104	Amount of Contribution (\$) \$4.46
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, Holly <hr/> Contributor address; City; State; Zip Code Olympia, WA 98506	Amount of Contribution (\$) \$1.79
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/120 Rpt: 53/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kollman, Molly <hr/> 6 Contributor address; City; State; Zip Code Denver, CO 80211	7 Amount of Contribution (\$) \$1.53
8 Principal occupation / Job title (See Instructions) Process Engineer		9 Employer (See Instructions)
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kollman, Molly <hr/> Contributor address; City; State; Zip Code Denver, CO 80211	Amount of Contribution (\$) \$1.53
Principal occupation / Job title (See Instructions) Process Engineer		Employer (See Instructions)
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kollman, Molly <hr/> Contributor address; City; State; Zip Code Denver, CO 80211	Amount of Contribution (\$) \$1.53
Principal occupation / Job title (See Instructions) Process Engineer		Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kollman, Molly <hr/> Contributor address; City; State; Zip Code Denver, CO 80211	Amount of Contribution (\$) \$1.53
Principal occupation / Job title (See Instructions) Process Engineer		Employer (See Instructions)
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kovac, Linda <hr/> Contributor address; City; State; Zip Code Kansas City, MO 64111	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/120 Rpt: 54/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kovac, Linda <hr/> 6 Contributor address; City; State; Zip Code Kansas City, MO 64111	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions)
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kovac, Linda <hr/> Contributor address; City; State; Zip Code Kansas City, MO 64111	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kovac, Linda <hr/> Contributor address; City; State; Zip Code Kansas City, MO 64111	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krause, Randall <hr/> Contributor address; City; State; Zip Code Cambridge, MA 02138	Amount of Contribution (\$) \$1.79
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kriegstein Jacobson, Sami <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11211	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Producer		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/120 Rpt: 55/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kriegstein Jacobson, Sami <hr/> 6 Contributor address; City; State; Zip Code Brooklyn, NY 11211	7 Amount of Contribution (\$) \$1.92
8 Principal occupation / Job title (See Instructions) Producer		9 Employer (See Instructions)
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kriegstein Jacobson, Sami <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11211	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Producer		Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kriegstein Jacobson, Sami <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11211	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Producer		Employer (See Instructions)
Date 10/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kruth, Tristan <hr/> Contributor address; City; State; Zip Code Portola Valley, CA 94028	Amount of Contribution (\$) \$1.79
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 10/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kurtz, Matthew <hr/> Contributor address; City; State; Zip Code Plano, TX 75024	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Business Manager		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/120 Rpt: 56/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kvasnyuk, Sergey <hr/> 6 Contributor address; City; State; Zip Code Alexandria, VA 22314	7 Amount of Contribution (\$) \$1.79
8 Principal occupation / Job title (See Instructions) accountant		9 Employer (See Instructions)
Date 07/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaVigne, Kate <hr/> Contributor address; City; State; Zip Code Hingham, MA 02043	Amount of Contribution (\$) \$1.15
Principal occupation / Job title (See Instructions) Operations Manager		Employer (See Instructions)
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaVigne, Kate <hr/> Contributor address; City; State; Zip Code Hingham, MA 02043	Amount of Contribution (\$) \$1.15
Principal occupation / Job title (See Instructions) Operations Manager		Employer (See Instructions)
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaVigne, Kate <hr/> Contributor address; City; State; Zip Code Hingham, MA 02043	Amount of Contribution (\$) \$1.15
Principal occupation / Job title (See Instructions) Operations Manager		Employer (See Instructions)
Date 10/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaVigne, Kate <hr/> Contributor address; City; State; Zip Code Hingham, MA 02043	Amount of Contribution (\$) \$1.15
Principal occupation / Job title (See Instructions) Operations Manager		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/120 Rpt: 57/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langan, Eric Andrew	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code Winnetka, IL 60093		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langan, Eric Andrew	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Winnetka, IL 60093		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langan, Eric Andrew	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Winnetka, IL 60093		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 10/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langan, Eric Andrew	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Winnetka, IL 60093		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 07/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawrence, Joshua	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code San Diego, CA 92117		
Principal occupation / Job title (See Instructions) General Manager		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/120 Rpt: 58/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawrence, Joshua <hr/> 6 Contributor address; City; State; Zip Code San Diego, CA 92117	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) General Manager		9 Employer (See Instructions)
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawrence, Joshua <hr/> Contributor address; City; State; Zip Code San Diego, CA 92117	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) General Manager		Employer (See Instructions)
Date 10/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawrence, Joshua <hr/> Contributor address; City; State; Zip Code San Diego, CA 92117	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) General Manager		Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Rodney <hr/> Contributor address; City; State; Zip Code Hershey, PA 17033	Amount of Contribution (\$) \$4.46
Principal occupation / Job title (See Instructions) Immigration Case Manager		Employer (See Instructions)
Date 07/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lhost, Adrienne <hr/> Contributor address; City; State; Zip Code Milwaukee, WI 53211	Amount of Contribution (\$) \$2.27
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/120 Rpt: 59/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lhost, Adrienne <hr/> 6 Contributor address; City; State; Zip Code Milwaukee, WI 53211	7 Amount of Contribution (\$) \$2.27
8 Principal occupation / Job title (See Instructions) Analyst		9 Employer (See Instructions)
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lhost, Adrienne <hr/> Contributor address; City; State; Zip Code Milwaukee, WI 53211	Amount of Contribution (\$) \$2.27
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions)
Date 10/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lhost, Adrienne <hr/> Contributor address; City; State; Zip Code Milwaukee, WI 53211	Amount of Contribution (\$) \$2.27
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions)
Date 10/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linn, Jos <hr/> Contributor address; City; State; Zip Code KANSAS CITY, MO 64113	Amount of Contribution (\$) \$1.79
Principal occupation / Job title (See Instructions) Associate Director		Employer (See Instructions)
Date 07/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd, Anamaria <hr/> Contributor address; City; State; Zip Code SEATTLE, WA 98119	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Investment Advisor		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 56/120 Rpt: 60/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd, Anamaria	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code SEATTLE, WA 98119	
8 Principal occupation / Job title (See Instructions) Investment Advisor		9 Employer (See Instructions)
Date 09/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd, Anamaria	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code SEATTLE, WA 98119	
Principal occupation / Job title (See Instructions) Investment Advisor		Employer (See Instructions)
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd, Anamaria	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code SEATTLE, WA 98119	
Principal occupation / Job title (See Instructions) Investment Advisor		Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loney, David	Amount of Contribution (\$) \$1.79
	Contributor address; City; State; Zip Code Farmington, NM 87402	
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Longacre-Wilcox, Vanessa	Amount of Contribution (\$) \$1.50
	Contributor address; City; State; Zip Code Seattle, WA 98116	
Principal occupation / Job title (See Instructions) Project manager		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/120 Rpt: 61/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Longacre-Wilcox, Vanessa	7 Amount of Contribution (\$) \$1.50
6 Contributor address; City; State; Zip Code Seattle, WA 98116		
8 Principal occupation / Job title (See Instructions) Project manager		9 Employer (See Instructions)
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Longacre-Wilcox, Vanessa	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Seattle, WA 98116		
Principal occupation / Job title (See Instructions) Project manager		Employer (See Instructions)
Date 10/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Longacre-Wilcox, Vanessa	Amount of Contribution (\$) \$1.50
Contributor address; City; State; Zip Code Seattle, WA 98116		
Principal occupation / Job title (See Instructions) Project manager		Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loughran, Katherine	Amount of Contribution (\$) \$4.46
Contributor address; City; State; Zip Code Flushing, NY 11358-3833		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lynch, Ellen	Amount of Contribution (\$) \$1.79
Contributor address; City; State; Zip Code Calabasas, CA 91302		
Principal occupation / Job title (See Instructions) None		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 58/120 Rpt: 62/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) M Johnson, Eva <hr/> 6 Contributor address; City; State; Zip Code portland, OR 97211	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) marketing director		9 Employer (See Instructions)
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) M Johnson, Eva <hr/> Contributor address; City; State; Zip Code portland, OR 97211	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) marketing director		Employer (See Instructions)
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) M Johnson, Eva <hr/> Contributor address; City; State; Zip Code portland, OR 97211	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) marketing director		Employer (See Instructions)
Date 10/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maltby, David <hr/> Contributor address; City; State; Zip Code Lakeville, CT 06039	Amount of Contribution (\$) \$8.77
Principal occupation / Job title (See Instructions) Real estate		Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mara, Karen <hr/> Contributor address; City; State; Zip Code Berwyn, PA 19312	Amount of Contribution (\$) \$1.79
Principal occupation / Job title (See Instructions) Self-employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 59/120 Rpt: 63/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marino, Anne	7 Amount of Contribution (\$) \$4.46
6 Contributor address; City; State; Zip Code New Suffolk, NY 11956		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marino, Rhiannon	Amount of Contribution (\$) \$1.92
Contributor address; City; State; Zip Code Chicago, IL 60614		
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions)
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marino, Rhiannon	Amount of Contribution (\$) \$1.92
Contributor address; City; State; Zip Code Chicago, IL 60614		
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions)
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marino, Rhiannon	Amount of Contribution (\$) \$1.92
Contributor address; City; State; Zip Code Chicago, IL 60614		
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marino, Rhiannon	Amount of Contribution (\$) \$1.92
Contributor address; City; State; Zip Code Chicago, IL 60614		
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 60/120 Rpt: 64/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Stephen <hr/> 6 Contributor address; City; State; Zip Code Round Top, TX 78954	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions)
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mason, Lily <hr/> Contributor address; City; State; Zip Code Washington, DC 20015	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mason, Lily <hr/> Contributor address; City; State; Zip Code Washington, DC 20015	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mason, Lily <hr/> Contributor address; City; State; Zip Code Washington, DC 20015	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mason, Lily <hr/> Contributor address; City; State; Zip Code Washington, DC 20015	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 61/120 Rpt: 65/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Massey, Kevin <hr/> 6 Contributor address; City; State; Zip Code Cambridge, MA 02139	7 Amount of Contribution (\$) \$1.92
8 Principal occupation / Job title (See Instructions) Software developer		9 Employer (See Instructions)
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Massey, Kevin <hr/> Contributor address; City; State; Zip Code Cambridge, MA 02139	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Software developer		Employer (See Instructions)
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Massey, Kevin <hr/> Contributor address; City; State; Zip Code Cambridge, MA 02139	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Software developer		Employer (See Instructions)
Date 10/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Massey, Kevin <hr/> Contributor address; City; State; Zip Code Cambridge, MA 02139	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Software developer		Employer (See Instructions)
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAuliffe, Keith <hr/> Contributor address; City; State; Zip Code Bellaire, TX 77401	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 62/120 Rpt: 66/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCreddie, Jill <hr/> 6 Contributor address; City; State; Zip Code Redwood City, CA 94062	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 07/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McElroy, Jim <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Financial Analyst		Employer (See Instructions)
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McElroy, Jim <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Financial Analyst		Employer (See Instructions)
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McElroy, Jim <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Financial Analyst		Employer (See Instructions)
Date 10/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McElroy, Jim <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Financial Analyst		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 63/120 Rpt: 67/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McIntosh, Michele <hr/> 6 Contributor address; City; State; Zip Code Raleigh, NC 27604	7 Amount of Contribution (\$) \$1.15
8 Principal occupation / Job title (See Instructions) Architect		9 Employer (See Instructions)
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McIntosh, Michele <hr/> Contributor address; City; State; Zip Code Raleigh, NC 27604	Amount of Contribution (\$) \$1.15
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions)
Date 09/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McIntosh, Michele <hr/> Contributor address; City; State; Zip Code Raleigh, NC 27604	Amount of Contribution (\$) \$1.15
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions)
Date 10/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McIntosh, Michele <hr/> Contributor address; City; State; Zip Code Raleigh, NC 27604	Amount of Contribution (\$) \$1.15
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions)
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mickel, Andrew <hr/> Contributor address; City; State; Zip Code Minneapolis, MN 55414	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Net Engr		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 64/120 Rpt: 68/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Amanda	7 Amount of Contribution (\$) \$2.00
6 Contributor address; City; State; Zip Code Camas, WA 98607		
8 Principal occupation / Job title (See Instructions) Valuation Specialist		9 Employer (See Instructions)
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Amanda	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Camas, WA 98607		
Principal occupation / Job title (See Instructions) Valuation Specialist		Employer (See Instructions)
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Amanda	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Camas, WA 98607		
Principal occupation / Job title (See Instructions) Valuation Specialist		Employer (See Instructions)
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Amanda	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Camas, WA 98607		
Principal occupation / Job title (See Instructions) Valuation Specialist		Employer (See Instructions)
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Amanda	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Camas, WA 98607		
Principal occupation / Job title (See Instructions) Valuation Specialist		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 65/120 Rpt: 69/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Amanda	7 Amount of Contribution (\$) \$2.00
6 Contributor address; City; State; Zip Code Camas, WA 98607		
8 Principal occupation / Job title (See Instructions) Valuation Specialist		9 Employer (See Instructions)
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Amanda	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Camas, WA 98607		
Principal occupation / Job title (See Instructions) Valuation Specialist		Employer (See Instructions)
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Amanda	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Camas, WA 98607		
Principal occupation / Job title (See Instructions) Valuation Specialist		Employer (See Instructions)
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Nick	Amount of Contribution (\$) \$7.69
Contributor address; City; State; Zip Code Rochester, MN 55902		
Principal occupation / Job title (See Instructions) Healthcare		Employer (See Instructions)
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Nick	Amount of Contribution (\$) \$7.69
Contributor address; City; State; Zip Code Rochester, MN 55902		
Principal occupation / Job title (See Instructions) Healthcare		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 66/120 Rpt: 70/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Nick <hr/> 6 Contributor address; City; State; Zip Code Rochester, MN 55902	7 Amount of Contribution (\$) \$7.69
8 Principal occupation / Job title (See Instructions) Healthcare		9 Employer (See Instructions)
Date 10/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Nick <hr/> Contributor address; City; State; Zip Code Rochester, MN 55902	Amount of Contribution (\$) \$7.69
Principal occupation / Job title (See Instructions) Healthcare		Employer (See Instructions)
Date 07/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Sara <hr/> Contributor address; City; State; Zip Code Denver, CO 80203	Amount of Contribution (\$) \$8.33
Principal occupation / Job title (See Instructions) Development Director		Employer (See Instructions)
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Sara <hr/> Contributor address; City; State; Zip Code Denver, CO 80203	Amount of Contribution (\$) \$8.33
Principal occupation / Job title (See Instructions) Development Director		Employer (See Instructions)
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Sara <hr/> Contributor address; City; State; Zip Code Denver, CO 80203	Amount of Contribution (\$) \$8.33
Principal occupation / Job title (See Instructions) Development Director		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 67/120 Rpt: 71/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Sara	7 Amount of Contribution (\$) \$8.33
6 Contributor address; City; State; Zip Code Denver, CO 80203		
8 Principal occupation / Job title (See Instructions) Development Director		9 Employer (See Instructions)
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Molnar, Melanie	Amount of Contribution (\$) \$1.92
Contributor address; City; State; Zip Code Chicago, IL 60657		
Principal occupation / Job title (See Instructions) Assistant General Manager		Employer (See Instructions)
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Molnar, Melanie	Amount of Contribution (\$) \$1.92
Contributor address; City; State; Zip Code Chicago, IL 60657		
Principal occupation / Job title (See Instructions) Assistant General Manager		Employer (See Instructions)
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Molnar, Melanie	Amount of Contribution (\$) \$1.92
Contributor address; City; State; Zip Code Chicago, IL 60657		
Principal occupation / Job title (See Instructions) Assistant General Manager		Employer (See Instructions)
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Jenny	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code APO, AE 09123		
Principal occupation / Job title (See Instructions) College Adjunct Professor		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 68/120 Rpt: 72/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Traci <hr/> 6 Contributor address; City; State; Zip Code Shepherdstown, WV 25443	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Technician		9 Employer (See Instructions)
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Traci <hr/> Contributor address; City; State; Zip Code Shepherdstown, WV 25443	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Technician		Employer (See Instructions)
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Traci <hr/> Contributor address; City; State; Zip Code Shepherdstown, WV 25443	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Technician		Employer (See Instructions)
Date 10/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Traci <hr/> Contributor address; City; State; Zip Code Shepherdstown, WV 25443	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Technician		Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mortensen, Joshua <hr/> Contributor address; City; State; Zip Code Boulder, CO 80303	Amount of Contribution (\$) \$1.79
Principal occupation / Job title (See Instructions) CMO		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 69/120 Rpt: 73/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mostyn, Amber <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77027-5204	7 Amount of Contribution (\$) \$35,000.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Mostyn Law
Date 10/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mulcahy, Terence <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90048	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Digital Marketing		Employer (See Instructions)
Date 07/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Maura <hr/> Contributor address; City; State; Zip Code St Louis Park, MN 55416	Amount of Contribution (\$) \$2.27
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 08/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Maura <hr/> Contributor address; City; State; Zip Code St Louis Park, MN 55416	Amount of Contribution (\$) \$2.27
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Maura <hr/> Contributor address; City; State; Zip Code St Louis Park, MN 55416	Amount of Contribution (\$) \$2.27
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 70/120 Rpt: 74/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Maura	7 Amount of Contribution (\$) \$2.27
6 Contributor address; City; State; Zip Code St Louis Park, MN 55416		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, kira	Amount of Contribution (\$) \$1.92
Contributor address; City; State; Zip Code Hoffman estates, IL 60169		
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions)
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, kira	Amount of Contribution (\$) \$1.92
Contributor address; City; State; Zip Code Hoffman estates, IL 60169		
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions)
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, kira	Amount of Contribution (\$) \$1.92
Contributor address; City; State; Zip Code Hoffman estates, IL 60169		
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, kira	Amount of Contribution (\$) \$1.92
Contributor address; City; State; Zip Code Hoffman estates, IL 60169		
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 71/120 Rpt: 75/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Zak <hr/> 6 Contributor address; City; State; Zip Code Seattle, WA 98133	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Patient Services Specialist		9 Employer (See Instructions)
Date 08/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Zak <hr/> Contributor address; City; State; Zip Code Seattle, WA 98133	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Patient Services Specialist		Employer (See Instructions)
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Zak <hr/> Contributor address; City; State; Zip Code Seattle, WA 98133	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Patient Services Specialist		Employer (See Instructions)
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Zak <hr/> Contributor address; City; State; Zip Code Seattle, WA 98133	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Patient Services Specialist		Employer (See Instructions)
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) News, Madelynne <hr/> Contributor address; City; State; Zip Code Upper Chichester, PA 19061	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Materials Management Tech		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 72/120 Rpt: 76/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neill, Theodore	7 Amount of Contribution (\$) \$3.00
6 Contributor address; City; State; Zip Code Shinagawa-ku 1410022 Japan		
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions)
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neill, Theodore	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code Shinagawa-ku 1410022 Japan		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neill, Theodore	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code Shinagawa-ku 1410022 Japan		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neill, Theodore	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code Shinagawa-ku 1410022 Japan		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Okie, Suzanna	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Darien, CT 06820		
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 73/120 Rpt: 77/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olsen, Jeffrey <hr/> 6 Contributor address; City; State; Zip Code Palmetto, GA 30268-2289	7 Amount of Contribution (\$) \$89.29
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Meagan <hr/> Contributor address; City; State; Zip Code San Diego, CA 92122	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions)
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Meagan <hr/> Contributor address; City; State; Zip Code San Diego, CA 92122	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions)
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Meagan <hr/> Contributor address; City; State; Zip Code San Diego, CA 92122	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions)
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Megan <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60614	Amount of Contribution (\$) \$1.54
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 74/120 Rpt: 78/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Megan <hr/> 6 Contributor address; City; State; Zip Code CHICAGO, IL 60614	7 Amount of Contribution (\$) \$1.54
8 Principal occupation / Job title (See Instructions) Accountant		9 Employer (See Instructions)
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Megan <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60614	Amount of Contribution (\$) \$1.54
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olson, Megan <hr/> Contributor address; City; State; Zip Code CHICAGO, IL 60614	Amount of Contribution (\$) \$1.54
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orchard, Phillip <hr/> Contributor address; City; State; Zip Code Austin, TX 78721	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orchard, Phillip <hr/> Contributor address; City; State; Zip Code Austin, TX 78721	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 75/120 Rpt: 79/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orchard, Phillip <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78721	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Analyst		9 Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orchard, Phillip <hr/> Contributor address; City; State; Zip Code Austin, TX 78721	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions)
Date 10/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oren, Eyal <hr/> Contributor address; City; State; Zip Code Marblehead, MA 01945	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions)
Date 07/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orloff, Nathan <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90034	Amount of Contribution (\$) \$7.69
Principal occupation / Job title (See Instructions) Editor		Employer (See Instructions)
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orloff, Nathan <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90034	Amount of Contribution (\$) \$7.69
Principal occupation / Job title (See Instructions) Editor		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 76/120 Rpt: 80/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orloff, Nathan <hr/> 6 Contributor address; City; State; Zip Code Los Angeles, CA 90034	7 Amount of Contribution (\$) \$7.69
8 Principal occupation / Job title (See Instructions) Editor		9 Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ostrander, Jason <hr/> Contributor address; City; State; Zip Code Irvine, CA 92604	Amount of Contribution (\$) \$1.79
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions)
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacillo, Edith <hr/> Contributor address; City; State; Zip Code Boise, ID 83702	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacillo, Edith <hr/> Contributor address; City; State; Zip Code Boise, ID 83702	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacillo, Edith <hr/> Contributor address; City; State; Zip Code Boise, ID 83702	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 77/120 Rpt: 81/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacillo, Edith	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code Boise, ID 83702		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paguio, Rafael	Amount of Contribution (\$) \$1.57
Contributor address; City; State; Zip Code Oceanside, CA 92056		
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions)
Date 08/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pakozdi, David	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Pacific Palisades, CA 90272		
Principal occupation / Job title (See Instructions) Physical therapist		Employer (See Instructions)
Date 07/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palumbo, Taylor	Amount of Contribution (\$) \$1.25
Contributor address; City; State; Zip Code New York, NY 10016		
Principal occupation / Job title (See Instructions) Investment Banker		Employer (See Instructions)
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palumbo, Taylor	Amount of Contribution (\$) \$1.25
Contributor address; City; State; Zip Code New York, NY 10016		
Principal occupation / Job title (See Instructions) Investment Banker		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 78/120 Rpt: 82/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palumbo, Taylor <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10016	7 Amount of Contribution (\$) \$1.25
8 Principal occupation / Job title (See Instructions) Investment Banker		9 Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paradise, Neil <hr/> Contributor address; City; State; Zip Code Hopkinton, MA 01748	Amount of Contribution (\$) \$1.61
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 10/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Park, Kenneth <hr/> Contributor address; City; State; Zip Code Oak Park, IL 60302	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Julia <hr/> Contributor address; City; State; Zip Code Bath, ME 04530	Amount of Contribution (\$) \$4.46
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pather, Shyamalan <hr/> Contributor address; City; State; Zip Code Seattle, WA 98105	Amount of Contribution (\$) \$89.29
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 79/120 Rpt: 83/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pellico, Ryan <hr/> 6 Contributor address; City; State; Zip Code Hamden, CT 06517	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions)
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pellico, Ryan <hr/> Contributor address; City; State; Zip Code Hamden, CT 06517	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pellico, Ryan <hr/> Contributor address; City; State; Zip Code Hamden, CT 06517	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pellico, Ryan <hr/> Contributor address; City; State; Zip Code Hamden, CT 06517	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions)
Date 10/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perdue, Gabriel <hr/> Contributor address; City; State; Zip Code Aurora, IL 60502	Amount of Contribution (\$) \$1.75
Principal occupation / Job title (See Instructions) Physicist		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 80/120 Rpt: 84/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perryman, Dorothy	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code Austell, GA 30168		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 07/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petremont, Aimee	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Milford, CT 06460		
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions)
Date 08/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petremont, Aimee	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Milford, CT 06460		
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions)
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petremont, Aimee	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Milford, CT 06460		
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions)
Date 10/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petremont, Aimee	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Milford, CT 06460		
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 81/120 Rpt: 85/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Gardner <hr/> 6 Contributor address; City; State; Zip Code Richmond, VA 23220	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 07/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Livia <hr/> Contributor address; City; State; Zip Code Pittsburgh, PA 15210	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Software developer		Employer (See Instructions)
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Livia <hr/> Contributor address; City; State; Zip Code Pittsburgh, PA 15210	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Software developer		Employer (See Instructions)
Date 09/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Livia <hr/> Contributor address; City; State; Zip Code Pittsburgh, PA 15210	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Software developer		Employer (See Instructions)
Date 10/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Livia <hr/> Contributor address; City; State; Zip Code Pittsburgh, PA 15210	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Software developer		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 82/120 Rpt: 86/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plaut, Jordan	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code Encino, CA 91316		
8 Principal occupation / Job title (See Instructions) Marketing		9 Employer (See Instructions)
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plaut, Jordan	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Encino, CA 91316		
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions)
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plaut, Jordan	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Encino, CA 91316		
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plaut, Jordan	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Encino, CA 91316		
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions)
Date 07/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pollard, David	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code Bedford, TX 76022		
Principal occupation / Job title (See Instructions) GIS Technician		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 83/120 Rpt: 87/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pollard, David <hr/> 6 Contributor address; City; State; Zip Code Bedford, TX 76022	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) GIS Technician		9 Employer (See Instructions)
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pollard, David <hr/> Contributor address; City; State; Zip Code Bedford, TX 76022	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) GIS Technician		Employer (See Instructions)
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poritz, Darwin <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Statistician		Employer (See Instructions)
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poritz, Darwin <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Statistician		Employer (See Instructions)
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poritz, Darwin <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Statistician		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 84/120 Rpt: 88/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poritz, Darwin <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77062	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Statistician		9 Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porter, Joseph <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90068	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) writer		Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powers, Lauren <hr/> Contributor address; City; State; Zip Code Winter Garden, FL 34787	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 10/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quinn, Ryan <hr/> Contributor address; City; State; Zip Code Selkirk, NY 12158	Amount of Contribution (\$) \$1.82
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions)
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rahalski, Joshua <hr/> Contributor address; City; State; Zip Code Henderson, NV 89074	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 85/120 Rpt: 89/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rahalski, Joshua <hr/> 6 Contributor address; City; State; Zip Code Henderson, NV 89074	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rahalski, Joshua <hr/> Contributor address; City; State; Zip Code Henderson, NV 89074	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 10/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rahalski, Joshua <hr/> Contributor address; City; State; Zip Code Henderson, NV 89074	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ran, Rochelle <hr/> Contributor address; City; State; Zip Code Garland, TX 75044	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Assistant behavior analyst		Employer (See Instructions)
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rank, Jonah <hr/> Contributor address; City; State; Zip Code Natick, MA 01760	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 86/120 Rpt: 90/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reitman, Rachael	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code Noho, CA 91606		
8 Principal occupation / Job title (See Instructions) Branded content		9 Employer (See Instructions)
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reitman, Rachael	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Noho, CA 91606		
Principal occupation / Job title (See Instructions) Branded content		Employer (See Instructions)
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reitman, Rachael	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Noho, CA 91606		
Principal occupation / Job title (See Instructions) Branded content		Employer (See Instructions)
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reitman, Rachael	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Noho, CA 91606		
Principal occupation / Job title (See Instructions) Branded content		Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Remaly, Gregory	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Charlottesville, VA 22911		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 87/120 Rpt: 91/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riffle, Michael <hr/> 6 Contributor address; City; State; Zip Code Cohasset, MA 02025	7 Amount of Contribution (\$) \$1.15
8 Principal occupation / Job title (See Instructions) Software Engineer		9 Employer (See Instructions)
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riffle, Michael <hr/> Contributor address; City; State; Zip Code Cohasset, MA 02025	Amount of Contribution (\$) \$1.15
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions)
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riffle, Michael <hr/> Contributor address; City; State; Zip Code Cohasset, MA 02025	Amount of Contribution (\$) \$1.15
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions)
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riffle, Michael <hr/> Contributor address; City; State; Zip Code Cohasset, MA 02025	Amount of Contribution (\$) \$1.15
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rini, Matthew <hr/> Contributor address; City; State; Zip Code New York, NY 10075	Amount of Contribution (\$) \$1.79
Principal occupation / Job title (See Instructions) Paralegal		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 88/120 Rpt: 92/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivera Garza, Edgar <hr/> 6 Contributor address; City; State; Zip Code San Francisco, CA 94107	7 Amount of Contribution (\$) \$1.79
8 Principal occupation / Job title (See Instructions) Business Operations		9 Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Clement <hr/> Contributor address; City; State; Zip Code Minneapolis, MN 55408	Amount of Contribution (\$) \$1.79
Principal occupation / Job title (See Instructions) Data Scientist		Employer (See Instructions)
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rocha, Mary Esther <hr/> Contributor address; City; State; Zip Code Houston, TX 77005	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions)
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rocha, Mary Esther <hr/> Contributor address; City; State; Zip Code Houston, TX 77005	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions)
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rocha, Mary Esther <hr/> Contributor address; City; State; Zip Code Houston, TX 77005	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 89/120 Rpt: 93/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rocha, Mary Esther <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77005	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) physician		9 Employer (See Instructions)
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodnick, Jason <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94122	Amount of Contribution (\$) \$1.54
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions)
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodnick, Jason <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94122	Amount of Contribution (\$) \$1.54
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions)
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodnick, Jason <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94122	Amount of Contribution (\$) \$1.54
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions)
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodnick, Jason <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94122	Amount of Contribution (\$) \$1.54
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 90/120 Rpt: 94/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Glenda <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78633	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) none		9 Employer (See Instructions)
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Glenda <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) none		Employer (See Instructions)
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Glenda <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) none		Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Glenda <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) none		Employer (See Instructions)
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roseman, Stuart <hr/> Contributor address; City; State; Zip Code Boston, MA 02116	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 91/120 Rpt: 95/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roseman, Stuart <hr/> 6 Contributor address; City; State; Zip Code Boston, MA 02116	7 Amount of Contribution (\$) \$19.23
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions)
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roseman, Stuart <hr/> Contributor address; City; State; Zip Code Boston, MA 02116	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roseman, Stuart <hr/> Contributor address; City; State; Zip Code Boston, MA 02116	Amount of Contribution (\$) \$19.23
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenthal, John <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94707	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions)
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rossetti, Paul <hr/> Contributor address; City; State; Zip Code Ventura, CA 93001	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 92/120 Rpt: 96/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rossetti, Paul <hr/> 6 Contributor address; City; State; Zip Code Ventura, CA 93001	7 Amount of Contribution (\$) \$3.12
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions)
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rossetti, Paul <hr/> Contributor address; City; State; Zip Code Ventura, CA 93001	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rossetti, Paul <hr/> Contributor address; City; State; Zip Code Ventura, CA 93001	Amount of Contribution (\$) \$3.12
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)
Date 10/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roy, David <hr/> Contributor address; City; State; Zip Code Excelsior, MN 55331	Amount of Contribution (\$) \$1.79
Principal occupation / Job title (See Instructions) operations mgmt		Employer (See Instructions)
Date 10/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roy, John <hr/> Contributor address; City; State; Zip Code Oakland, CA 94607	Amount of Contribution (\$) \$4.39
Principal occupation / Job title (See Instructions) Engineering Manager		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 93/120 Rpt: 97/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rudman, Denise <hr/> 6 Contributor address; City; State; Zip Code Manchester, NH 03104	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rudman, Denise <hr/> Contributor address; City; State; Zip Code Manchester, NH 03104	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rudman, Denise <hr/> Contributor address; City; State; Zip Code Manchester, NH 03104	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 10/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rudman, Denise <hr/> Contributor address; City; State; Zip Code Manchester, NH 03104	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 07/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Jason <hr/> Contributor address; City; State; Zip Code Medford, MA 02155	Amount of Contribution (\$) \$4.55
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 94/120 Rpt: 98/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Jason <hr/> 6 Contributor address; City; State; Zip Code Medford, MA 02155	7 Amount of Contribution (\$) \$4.55
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions)
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Jason <hr/> Contributor address; City; State; Zip Code Medford, MA 02155	Amount of Contribution (\$) \$4.55
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)
Date 10/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Jason <hr/> Contributor address; City; State; Zip Code Medford, MA 02155	Amount of Contribution (\$) \$4.55
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)
Date 07/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sabia, Colin <hr/> Contributor address; City; State; Zip Code Tacoma, WA 98407	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sabia, Colin <hr/> Contributor address; City; State; Zip Code Tacoma, WA 98407	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 95/120 Rpt: 99/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sabia, Colin <hr/> 6 Contributor address; City; State; Zip Code Tacoma, WA 98407	7 Amount of Contribution (\$) \$3.85
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions)
Date 10/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sabia, Colin <hr/> Contributor address; City; State; Zip Code Tacoma, WA 98407	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)
Date 10/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Stefanie <hr/> Contributor address; City; State; Zip Code Naples, FL 34109-6153	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) self employed		Employer (See Instructions)
Date 10/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sapp, Amanda <hr/> Contributor address; City; State; Zip Code Barnegat, NJ 08005	Amount of Contribution (\$) \$1.79
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions)
Date 10/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schild, Kathryn <hr/> Contributor address; City; State; Zip Code Anchorage, AK 99515	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) instructional designer		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 96/120 Rpt: 100/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuffelen, Adriaan Cody	7 Amount of Contribution (\$) \$7.69
6 Contributor address; City; State; Zip Code Palo Alto, CA 94306		
8 Principal occupation / Job title (See Instructions) Software Engineer		9 Employer (See Instructions)
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuffelen, Adriaan Cody	Amount of Contribution (\$) \$7.69
Contributor address; City; State; Zip Code Palo Alto, CA 94306		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions)
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuffelen, Adriaan Cody	Amount of Contribution (\$) \$7.69
Contributor address; City; State; Zip Code Palo Alto, CA 94306		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuffelen, Adriaan Cody	Amount of Contribution (\$) \$7.69
Contributor address; City; State; Zip Code Palo Alto, CA 94306		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions)
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulz, Jennefer	Amount of Contribution (\$) \$3.85
Contributor address; City; State; Zip Code Washington, DC 20002		
Principal occupation / Job title (See Instructions) International Project Coordinator		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 97/120 Rpt: 101/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulz, Jennefer <hr/> 6 Contributor address; City; State; Zip Code Washington, DC 20002	7 Amount of Contribution (\$) \$3.85
8 Principal occupation / Job title (See Instructions) International Project Coordinator		9 Employer (See Instructions)
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulz, Jennefer <hr/> Contributor address; City; State; Zip Code Washington, DC 20002	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) International Project Coordinator		Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulz, Jennefer <hr/> Contributor address; City; State; Zip Code Washington, DC 20002	Amount of Contribution (\$) \$3.85
Principal occupation / Job title (See Instructions) International Project Coordinator		Employer (See Instructions)
Date 07/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Alan <hr/> Contributor address; City; State; Zip Code Portland, OR 97202	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions)
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Alan <hr/> Contributor address; City; State; Zip Code Portland, OR 97202	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 98/120 Rpt: 102/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Alan	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Portland, OR 97202		
8 Principal occupation / Job title (See Instructions) Architect		9 Employer (See Instructions)
Date 10/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Alan	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Portland, OR 97202		
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions)
Date 07/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sellars, Kathryn	Amount of Contribution (\$) \$1.92
Contributor address; City; State; Zip Code Denver, CO 80210		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 09/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sellars, Kathryn	Amount of Contribution (\$) \$1.92
Contributor address; City; State; Zip Code Denver, CO 80210		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shamir, Ilan	Amount of Contribution (\$) \$1.79
Contributor address; City; State; Zip Code Berkeley, CA 94708		
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 99/120 Rpt: 103/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheng, Eric	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Renton, WA 98058		
8 Principal occupation / Job title (See Instructions) Software Engineer		9 Employer (See Instructions)
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Nathan	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Denver, CO 80203		
Principal occupation / Job title (See Instructions) Sustainability Consultant		Employer (See Instructions)
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Nathan	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Denver, CO 80203		
Principal occupation / Job title (See Instructions) Sustainability Consultant		Employer (See Instructions)
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Nathan	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Denver, CO 80203		
Principal occupation / Job title (See Instructions) Sustainability Consultant		Employer (See Instructions)
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Nathan	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Denver, CO 80203		
Principal occupation / Job title (See Instructions) Sustainability Consultant		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 100/120 Rpt: 104/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Sean <hr/> 6 Contributor address; City; State; Zip Code Chicago, IL 60657	7 Amount of Contribution (\$) \$1.79
8 Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions)
Date 07/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snow, Rosina <hr/> Contributor address; City; State; Zip Code Charlottesville, VA 22903	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) minister		Employer (See Instructions)
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snow, Rosina <hr/> Contributor address; City; State; Zip Code Charlottesville, VA 22903	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) minister		Employer (See Instructions)
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snow, Rosina <hr/> Contributor address; City; State; Zip Code Charlottesville, VA 22903	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) minister		Employer (See Instructions)
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sobin, Kathryn <hr/> Contributor address; City; State; Zip Code Waltham, MA 02453	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Admin assistant		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 101/120 Rpt: 105/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sobin, Kathryn <hr/> 6 Contributor address; City; State; Zip Code Waltham, MA 02453	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Admin assistant		9 Employer (See Instructions)
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sobin, Kathryn <hr/> Contributor address; City; State; Zip Code Waltham, MA 02453	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Admin assistant		Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sobin, Kathryn <hr/> Contributor address; City; State; Zip Code Waltham, MA 02453	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Admin assistant		Employer (See Instructions)
Date 07/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sommer, Sarah <hr/> Contributor address; City; State; Zip Code Westport, CT 06880	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Program Manager		Employer (See Instructions)
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sommer, Sarah <hr/> Contributor address; City; State; Zip Code Westport, CT 06880	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Program Manager		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 102/120 Rpt: 106/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sommer, Sarah	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code Westport, CT 06880		
8 Principal occupation / Job title (See Instructions) Program Manager		9 Employer (See Instructions)
Date 10/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Souza, Melissa	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Rio De Janiero 22470070 Brazil		
Principal occupation / Job title (See Instructions) International Analyst		Employer (See Instructions)
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Speckman, Rebecca	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Seattle, WA 98103		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions)
Date 10/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Speckman, Rebecca	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Seattle, WA 98103		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions)
Date 10/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spitz, Richard	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code White Plains, OH 10606		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 103/120 Rpt: 107/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stamm, Reto	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Santa Cruz, CA 95060		
8 Principal occupation / Job title (See Instructions) Student		9 Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stockman, Carol	Amount of Contribution (\$) \$3.57
Contributor address; City; State; Zip Code Chattahoochee Hills, GA 30268		
Principal occupation / Job title (See Instructions) Adj. Professor		Employer (See Instructions)
Date 10/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stoeppelwerth, Ian	Amount of Contribution (\$) \$1.75
Contributor address; City; State; Zip Code Miami, FL 33166		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strack, Anton	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Lutherville, MD 21093		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions)
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Svrjcek, Deborah	Amount of Contribution (\$) \$1.92
Contributor address; City; State; Zip Code Longmont, CO 80503		
Principal occupation / Job title (See Instructions) Operations manager		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 104/120 Rpt: 108/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Svrjcek, Deborah <hr/> 6 Contributor address; City; State; Zip Code Longmont, CO 80503	7 Amount of Contribution (\$) \$1.92
8 Principal occupation / Job title (See Instructions) Operations manager		9 Employer (See Instructions)
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Svrjcek, Deborah <hr/> Contributor address; City; State; Zip Code Longmont, CO 80503	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Operations manager		Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Svrjcek, Deborah <hr/> Contributor address; City; State; Zip Code Longmont, CO 80503	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Operations manager		Employer (See Instructions)
Date 07/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tchou, Philip <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78251	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Medical Physicist		Employer (See Instructions)
Date 08/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tchou, Philip <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78251	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Medical Physicist		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 105/120 Rpt: 109/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tchou, Philip <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78251	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Medical Physicist		9 Employer (See Instructions)
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tchou, Philip <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78251	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Medical Physicist		Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tiemann, Shawn <hr/> Contributor address; City; State; Zip Code Lawrence, KS 66044	Amount of Contribution (\$) \$4.46
Principal occupation / Job title (See Instructions) Sales Engineer		Employer (See Instructions)
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ton, Jessica <hr/> Contributor address; City; State; Zip Code Pasadena, MD 21122	Amount of Contribution (\$) \$6.25
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions)
Date 08/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ton, Jessica <hr/> Contributor address; City; State; Zip Code Pasadena, MD 21122	Amount of Contribution (\$) \$6.25
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 106/120 Rpt: 110/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ton, Jessica <hr/> 6 Contributor address; City; State; Zip Code Pasadena, MD 21122	7 Amount of Contribution (\$) \$6.25
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions)
Date 10/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ton, Jessica <hr/> Contributor address; City; State; Zip Code Pasadena, MD 21122	Amount of Contribution (\$) \$6.25
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions)
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tucker, Rick <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76110	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tucker, Rick <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76110	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ulery, David <hr/> Contributor address; City; State; Zip Code Fitchburg, WI 53711	Amount of Contribution (\$) \$1.79
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 107/120 Rpt: 111/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VILA ECHAGUE APPEL, EDUARDO <hr/> 6 Contributor address; City; State; Zip Code SEATTLE, WA 98199	7 Amount of Contribution (\$) \$4.46
8 Principal occupation / Job title (See Instructions) Software engineer		9 Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veronesi, David <hr/> Contributor address; City; State; Zip Code Berlin, CT 06037	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Business Lead		Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veronesi, David <hr/> Contributor address; City; State; Zip Code Berlin, CT 06037	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Business Lead		Employer (See Instructions)
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WENDT, Kirsten <hr/> Contributor address; City; State; Zip Code Anchorage, AK 99511	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions)
Date 07/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watkins, Laura <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 108/120 Rpt: 112/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watkins, Laura <hr/> 6 Contributor address; City; State; Zip Code Berkeley, CA 94704	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watkins, Laura <hr/> Contributor address; City; State; Zip Code Berkeley, CA 94704	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weintraub, David <hr/> Contributor address; City; State; Zip Code New York, NY 10128	Amount of Contribution (\$) \$8.93
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions)
Date 10/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiss, James <hr/> Contributor address; City; State; Zip Code Boise, ID 83702	Amount of Contribution (\$) \$1.79
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions)
Date 07/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiss, Marina <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11225	Amount of Contribution (\$) \$7.69
Principal occupation / Job title (See Instructions) Postdoctoral Fellow		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 109/120 Rpt: 113/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiss, Marina <hr/> 6 Contributor address; City; State; Zip Code Brooklyn, NY 11225	7 Amount of Contribution (\$) \$7.69
8 Principal occupation / Job title (See Instructions) Postdoctoral Fellow		9 Employer (See Instructions)
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiss, Marina <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11225	Amount of Contribution (\$) \$7.69
Principal occupation / Job title (See Instructions) Postdoctoral Fellow		Employer (See Instructions)
Date 10/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westfold, Stephen <hr/> Contributor address; City; State; Zip Code Woodside, CA 94062-4244	Amount of Contribution (\$) \$4.46
Principal occupation / Job title (See Instructions) Computer Scientist		Employer (See Instructions)
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Matthew <hr/> Contributor address; City; State; Zip Code Boston, MA 02124	Amount of Contribution (\$) \$7.69
Principal occupation / Job title (See Instructions) Profit Center Manager		Employer (See Instructions)
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Matthew <hr/> Contributor address; City; State; Zip Code Boston, MA 02124	Amount of Contribution (\$) \$7.69
Principal occupation / Job title (See Instructions) Profit Center Manager		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 110/120 Rpt: 114/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Matthew	7 Amount of Contribution (\$) \$7.69
6 Contributor address; City; State; Zip Code Boston, MA 02124		
8 Principal occupation / Job title (See Instructions) Profit Center Manager		9 Employer (See Instructions)
Date 10/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Matthew	Amount of Contribution (\$) \$7.69
Contributor address; City; State; Zip Code Boston, MA 02124		
Principal occupation / Job title (See Instructions) Profit Center Manager		Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitlock, Frank	Amount of Contribution (\$) \$4.46
Contributor address; City; State; Zip Code Colorado Springs, CO 80924		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitney, Matthew	Amount of Contribution (\$) \$3.85
Contributor address; City; State; Zip Code Seattle, WA 98117		
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions)
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitney, Matthew	Amount of Contribution (\$) \$3.85
Contributor address; City; State; Zip Code Seattle, WA 98117		
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 111/120 Rpt: 115/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitney, Matthew	7 Amount of Contribution (\$) \$3.85
6 Contributor address; City; State; Zip Code Seattle, WA 98117		
8 Principal occupation / Job title (See Instructions) Artist		9 Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitney, Matthew	Amount of Contribution (\$) \$3.85
Contributor address; City; State; Zip Code Seattle, WA 98117		
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Widrig, Marcela	Amount of Contribution (\$) \$1.79
Contributor address; City; State; Zip Code Sierra Madre, CA 91025		
Principal occupation / Job title (See Instructions) counselor		Employer (See Instructions)
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wieckowski, David	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Round Rock, TX 78664		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Elizabeth	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Alamogordo, NM 88310		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 112/120 Rpt: 116/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Elizabeth	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Alamogordo, NM 88310		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions)
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Elizabeth	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Alamogordo, NM 88310		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 09/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Elizabeth	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Alamogordo, NM 88310		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 10/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Elizabeth	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Alamogordo, NM 88310		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions)
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Windham, Emily	Amount of Contribution (\$) \$1.92
Contributor address; City; State; Zip Code White Hall, MD 21161		
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 113/120 Rpt: 117/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Windham, Emily <hr/> 6 Contributor address; City; State; Zip Code White Hall, MD 21161	7 Amount of Contribution (\$) \$1.92
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions)
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Windham, Emily <hr/> Contributor address; City; State; Zip Code White Hall, MD 21161	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Windham, Emily <hr/> Contributor address; City; State; Zip Code White Hall, MD 21161	Amount of Contribution (\$) \$1.92
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions)
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wise, Jim <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Basis		Employer (See Instructions)
Date 10/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Amy <hr/> Contributor address; City; State; Zip Code Palo Alto, CA 94303-2814	Amount of Contribution (\$) \$1.79
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 114/120 Rpt: 118/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wyzlic, Margaret	7 Amount of Contribution (\$) \$1.92
6 Contributor address; City; State; Zip Code Ann Arbor, MI 48103		
8 Principal occupation / Job title (See Instructions) Communications Manager		9 Employer (See Instructions)
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wyzlic, Margaret	Amount of Contribution (\$) \$1.92
Contributor address; City; State; Zip Code Ann Arbor, MI 48103		
Principal occupation / Job title (See Instructions) Communications Manager		Employer (See Instructions)
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wyzlic, Margaret	Amount of Contribution (\$) \$1.92
Contributor address; City; State; Zip Code Ann Arbor, MI 48103		
Principal occupation / Job title (See Instructions) Communications Manager		Employer (See Instructions)
Date 07/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yancy, Max	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Austin, TX 78722		
Principal occupation / Job title (See Instructions) Volunteer & Events Coordinator		Employer (See Instructions)
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yancy, Max	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Austin, TX 78722		
Principal occupation / Job title (See Instructions) Volunteer & Events Coordinator		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 115/120 Rpt: 119/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yancy, Max <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78722	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Volunteer & Events Coordinator		9 Employer (See Instructions)
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yancy, Max <hr/> Contributor address; City; State; Zip Code Austin, TX 78722	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Volunteer & Events Coordinator		Employer (See Instructions)
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yancy, Max <hr/> Contributor address; City; State; Zip Code Austin, TX 78765	Amount of Contribution (\$) \$2.27
Principal occupation / Job title (See Instructions) Volunteer & Events Coordinator		Employer (See Instructions)
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yancy, Max <hr/> Contributor address; City; State; Zip Code Austin, TX 78765	Amount of Contribution (\$) \$2.27
Principal occupation / Job title (See Instructions) Volunteer & Events Coordinator		Employer (See Instructions)
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yancy, Max <hr/> Contributor address; City; State; Zip Code Austin, TX 78765	Amount of Contribution (\$) \$2.27
Principal occupation / Job title (See Instructions) Volunteer & Events Coordinator		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 116/120 Rpt: 120/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yancy, Max <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78765	7 Amount of Contribution (\$) \$2.27
8 Principal occupation / Job title (See Instructions) Volunteer & Events Coordinator		9 Employer (See Instructions)
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yepez, Cynthia <hr/> Contributor address; City; State; Zip Code Houston, TX 77004	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yoon, Michael <hr/> Contributor address; City; State; Zip Code Longmont, CO 80504	Amount of Contribution (\$) \$1.79
Principal occupation / Job title (See Instructions) Software developer		Employer (See Instructions)
Date 10/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Kyle <hr/> Contributor address; City; State; Zip Code Grove City, OH 43123	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Business Consultant		Employer (See Instructions)
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zumbach, Mallory <hr/> Contributor address; City; State; Zip Code Portland, OR 97202	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Music Synchronization		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 117/120 Rpt: 121/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zumbach, Mallory <hr/> 6 Contributor address; City; State; Zip Code Portland, OR 97202	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Music Synchronization		9 Employer (See Instructions)
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zumbach, Mallory <hr/> Contributor address; City; State; Zip Code Portland, OR 97202	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Music Synchronization		Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zumbach, Mallory <hr/> Contributor address; City; State; Zip Code Portland, OR 97202	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Music Synchronization		Employer (See Instructions)
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) armstrong, william <hr/> Contributor address; City; State; Zip Code Spring Branch, TX 78070	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) pharmacist		Employer (See Instructions)
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) armstrong, william <hr/> Contributor address; City; State; Zip Code Spring Branch, TX 78070	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) pharmacist		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 118/120 Rpt: 122/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) armstrong, william <hr/> 6 Contributor address; City; State; Zip Code Spring Branch, TX 78070	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) pharmacist		9 Employer (See Instructions)
Date 10/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) armstrong, william <hr/> Contributor address; City; State; Zip Code Spring Branch, TX 78070	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) pharmacist		Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) bartholomew, thomas <hr/> Contributor address; City; State; Zip Code Washington, DC 20011	Amount of Contribution (\$) \$7.14
Principal occupation / Job title (See Instructions) Dc gov		Employer (See Instructions)
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) raben, alexis <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90004	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Producer		Employer (See Instructions)
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) raben, alexis <hr/> Contributor address; City; State; Zip Code Los Angeles, CA 90004	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Producer		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 119/120 Rpt: 123/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) raben, alexis	7 Amount of Contribution (\$) \$2.00
6 Contributor address; City; State; Zip Code Los Angeles, CA 90004		
8 Principal occupation / Job title (See Instructions) Producer		9 Employer (See Instructions)
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) raben, alexis	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Los Angeles, CA 90004		
Principal occupation / Job title (See Instructions) Producer		Employer (See Instructions)
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) smith-howe, abbie	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Medford, MA 02155		
Principal occupation / Job title (See Instructions) occupational therapist		Employer (See Instructions)
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) smith-howe, abbie	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Medford, MA 02155		
Principal occupation / Job title (See Instructions) occupational therapist		Employer (See Instructions)
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) smith-howe, abbie	Amount of Contribution (\$) \$2.50
Contributor address; City; State; Zip Code Medford, MA 02155		
Principal occupation / Job title (See Instructions) occupational therapist		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 120/120 Rpt: 124/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) smith-howe, abbie <hr/> 6 Contributor address; City; State; Zip Code Medford, MA 02155	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) occupational therapist		9 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/35 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/26/2024	5 Payee name ActBlue	
6 Amount (\$) \$409.88 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 366 Summer St. Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Creditcard processing fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/11/2024	Candidate/Officeholder name Alliance 4 LLC	
Amount (\$) \$2,481.84 <input type="checkbox"/> Expenditure from corporate funds	Office sought 5024 Devon Dr McKinney, TX 75070	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rent
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/09/2024	Candidate/Officeholder name Alliance 4 LLC	
Amount (\$) \$1,350.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought 5024 Devon Dr McKinney, TX 75070	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rent
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate/Officeholder name Office sought Office held		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/35 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
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4 Date 10/03/2024	5 Payee name Alliance 4 LLC
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6 Amount (\$) \$1,350.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5024 Devon Dr McKinney, TX 75070
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rent
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/02/2024	Payee name American Express
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Amount (\$) \$7,841.49 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 200 Vesey St New York, NY 10285
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Creditcard payment
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/02/2024	Payee name American Express
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Amount (\$) \$3,740.73 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 200 Vesey St New York, NY 10285
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Creditcard payment
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/35 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/05/2024	5 Payee name American Express	
6 Amount (\$) \$2,372.11 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 200 Vesey St New York, NY 10285	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Creditcard payment
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/17/2024	Payee name Bee Compliance LLC	
Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 611 Pennsylvania Ave SE, #192 Washington, DC 20003	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign compliance consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/02/2024	Payee name Debbits & Credits Bookkeeping	
Amount (\$) \$861.25 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4117 Hoffman Dr Woodbridge, VA 22193	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/35 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/30/2024	5 Payee name Debbits & Credits Bookkeeping	
6 Amount (\$) \$543.75 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 4117 Hoffman Dr Woodbridge, VA 22193	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/24/2024	Payee name Debbits & Credits Bookkeeping	
Amount (\$) \$468.75 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4117 Hoffman Dr Woodbridge, VA 22193	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/08/2024	Payee name Debbits & Credits Bookkeeping	
Amount (\$) \$455.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4117 Hoffman Dr Woodbridge, VA 22193	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/35 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
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4 Date 09/24/2024	5 Payee name Debbits & Credits Bookkeeping
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6 Amount (\$) \$450.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 4117 Hoffman Dr Woodbridge, VA 22193
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/26/2024	Payee name First Bank
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Amount (\$) \$22.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1380 Monroe St. NW Lakewood, CO 80219
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking Fees
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/29/2024	Payee name First Bank
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Amount (\$) \$22.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1380 Monroe St. NW Lakewood, CO 80219
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking Fees
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/35 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/26/2024	5 Payee name First Bank	
6 Amount (\$) \$22.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1380 Monroe St. NW Lakewood, CO 80219	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking Fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/03/2024	Payee name First Bank	
Amount (\$) \$49.90 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1380 Monroe St. NW Lakewood, CO 80219	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/29/2024	Payee name First Bank	
Amount (\$) \$49.90 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1380 Monroe St. NW Lakewood, CO 80219	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/35 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/03/2024	5 Payee name First Bank	
6 Amount (\$) \$49.90 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1380 Monroe St. NW Lakewood, CO 80219	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking Fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/04/2024	Payee name First Bank	
Amount (\$) \$308.90 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1380 Monroe St. NW Lakewood, CO 80219	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/31/2024	Payee name First Bank	
Amount (\$) \$0.50 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1380 Monroe St. NW Lakewood, CO 80219	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/35 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/30/2024	5 Payee name First Bank	
6 Amount (\$) \$0.25 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1380 Monroe St. NW Lakewood, CO 80219	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/30/2024	Candidate/Officeholder name Office sought Office held	
Payee name First Bank		
Amount (\$) \$0.25 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1380 Monroe St. NW Lakewood, CO 80219	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/26/2024	Candidate/Officeholder name Office sought Office held	
Payee name First Bank		
Amount (\$) \$30.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1380 Monroe St. NW Lakewood, CO 80219	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/35 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/30/2024	5 Payee name First Bank	
6 Amount (\$) \$22.80 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1380 Monroe St. NW Lakewood, CO 80219	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking Fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/26/2024	Payee name First Bank	
Amount (\$) \$22.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1380 Monroe St. NW Lakewood, CO 80219	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/31/2024	Payee name Gusto	
Amount (\$) \$5,349.83 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/35 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/15/2024	5 Payee name Gusto	
6 Amount (\$) \$3,887.14 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/15/2024	Payee name Gusto	
Amount (\$) \$3,134.79 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/30/2024	Payee name Gusto	
Amount (\$) \$3,086.76 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/35 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/15/2024	5 Payee name Gusto	
6 Amount (\$) \$2,829.65 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/30/2024	Payee name Gusto	
Amount (\$) \$2,011.84 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/13/2024	Payee name Gusto	
Amount (\$) \$1,980.45 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/35 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/15/2024	5 Payee name Gusto	
6 Amount (\$) \$1,845.46 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/31/2024	Payee name Gusto	
Amount (\$) \$1,845.46 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/30/2024	Payee name Gusto	
Amount (\$) \$1,845.46 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/35 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
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4 Date 09/13/2024	5 Payee name Gusto
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6 Amount (\$) \$1,845.46 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/30/2024	Payee name Gusto
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Amount (\$) \$1,845.46 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/15/2024	Payee name Gusto
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Amount (\$) \$1,845.45 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/35 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/15/2024	5 Payee name Gusto	
6 Amount (\$) \$1,845.45 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/31/2024	Payee name Gusto	
Amount (\$) \$1,224.88 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/06/2024	Payee name Gusto	
Amount (\$) \$980.07 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/35 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
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4 Date 07/15/2024	5 Payee name Gusto
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6 Amount (\$) \$870.58 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/15/2024	Payee name Gusto
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Amount (\$) \$756.92 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/15/2024	Payee name Gusto
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Amount (\$) \$743.50 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 16/35 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
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4 Date 08/15/2024	5 Payee name Gusto
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6 Amount (\$) \$708.76 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/30/2024	Payee name Gusto
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Amount (\$) \$706.29 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/15/2024	Payee name Gusto
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Amount (\$) \$677.30 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 17/35 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
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4 Date 07/15/2024	5 Payee name Gusto
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6 Amount (\$) \$625.83 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/15/2024	Payee name Gusto
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Amount (\$) \$619.75 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/15/2024	Payee name Gusto
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Amount (\$) \$592.14 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 18/35 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
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4 Date 07/15/2024	5 Payee name Gusto
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6 Amount (\$) \$537.50 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/15/2024	Payee name Gusto
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Amount (\$) \$524.77 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/15/2024	Payee name Gusto
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Amount (\$) \$524.77 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 19/35 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
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4 Date 07/15/2024	5 Payee name Gusto
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6 Amount (\$) \$524.75 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/31/2024	Payee name Gusto
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Amount (\$) \$524.75 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/30/2024	Payee name Gusto
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Amount (\$) \$524.75 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 20/35 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/13/2024	5 Payee name Gusto	
6 Amount (\$) \$524.75 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/30/2024	Payee name Gusto	
Amount (\$) \$524.75 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/15/2024	Payee name Gusto	
Amount (\$) \$496.91 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 21/35 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
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4 Date 09/30/2024	5 Payee name Gusto
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6 Amount (\$) \$481.01 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/13/2024	Payee name Gusto
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Amount (\$) \$471.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/15/2024	Payee name Gusto
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Amount (\$) \$438.36 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 22/35 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
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4 Date 10/15/2024	5 Payee name Gusto
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6 Amount (\$) \$427.14 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/15/2024	Payee name Gusto
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Amount (\$) \$420.28 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/15/2024	Payee name Gusto
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Amount (\$) \$406.45 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 23/35 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/15/2024	5 Payee name Gusto	
6 Amount (\$) \$384.32 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/30/2024	Payee name Gusto	
Amount (\$) \$358.53 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/03/2024	Payee name Gusto	
Amount (\$) \$353.92 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 24/35 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
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4 Date 09/30/2024	5 Payee name Gusto
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6 Amount (\$) \$318.59 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/31/2024	Payee name Gusto
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Amount (\$) \$299.11 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/15/2024	Payee name Gusto
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Amount (\$) \$277.44 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 25/35 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/15/2024	5 Payee name Gusto	
6 Amount (\$) \$275.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/13/2024	Payee name Gusto	
Amount (\$) \$242.28 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/15/2024	Payee name Gusto	
Amount (\$) \$205.73 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 26/35 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/15/2024	5 Payee name Gusto	
6 Amount (\$) \$177.98 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/06/2024	Payee name Gusto	
Amount (\$) \$168.92 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/15/2024	Payee name Gusto	
Amount (\$) \$167.73 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 27/35 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
4 Date 08/02/2024	5 Payee name Gusto	
6 Amount (\$) \$149.24 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/05/2024	Payee name Gusto	
Amount (\$) \$149.24 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/15/2024	Payee name Gusto	
Amount (\$) \$139.30 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 28/35 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
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4 Date 07/15/2024	5 Payee name Gusto
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6 Amount (\$) \$136.22 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/03/2024	Payee name Gusto
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Amount (\$) \$123.66 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/15/2024	Payee name Gusto
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Amount (\$) \$121.94 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 29/35 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/15/2024	5 Payee name Gusto	
6 Amount (\$) \$120.45 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/15/2024	Payee name Gusto	
Amount (\$) \$101.12 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/15/2024	Payee name Gusto	
Amount (\$) \$100.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 30/35 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
4 Date 07/31/2024	5 Payee name Gusto	
6 Amount (\$) \$100.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/15/2024	Payee name Gusto	
Amount (\$) \$83.98 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/15/2024	Payee name Gusto	
Amount (\$) \$80.03 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 31/35 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
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4 Date 07/15/2024	5 Payee name Gusto
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6 Amount (\$) \$77.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/15/2024	Payee name Gusto
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Amount (\$) \$75.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/30/2024	Payee name Gusto
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Amount (\$) \$75.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 32/35 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
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4 Date 07/15/2024	5 Payee name Gusto
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6 Amount (\$) \$71.46 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/15/2024	Payee name Gusto
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Amount (\$) \$54.38 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/13/2024	Payee name Gusto
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Amount (\$) \$50.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 33/35 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
4 Date 09/30/2024	5 Payee name Gusto	
6 Amount (\$) \$50.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/15/2024	Payee name Gusto	
Amount (\$) \$50.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 525 20th St San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/06/2024	Payee name LGG Group LLC	
Amount (\$) \$287.50 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 7905 Cahill Dr Austin, TX 78729	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign compliance consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 34/35 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
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4 Date 07/17/2024	5 Payee name Optimize Services LLC
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6 Amount (\$) \$2,250.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 90 Canal St Boston, MA 02114
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/17/2024	Payee name Optimize Services LLC
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Amount (\$) \$2,025.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 90 Canal St Boston, MA 02114
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/05/2024	Payee name Optimize Services LLC
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Amount (\$) \$1,290.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 90 Canal St Boston, MA 02114
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 35/35 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
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4 Date 08/14/2024	5 Payee name Optimize Services LLC
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6 Amount (\$) \$1,125.00	7 Payee address; City; State; Zip Code 90 Canal St Boston, MA 02114
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Expenditure from corporate funds

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/02/2024	Payee name Optimize Services LLC
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Amount (\$) \$975.00	Payee address; City; State; Zip Code 90 Canal St Boston, MA 02114
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Expenditure from corporate funds

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 1/13 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
4 CREDIT CARD ISSUER	Name of financial institution American Express	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 458.56
6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$1,390.37	(b) Date of Charge 08/15/2024
7 PAYEE	(a) Payee name Alliance 4 LLC	(c) Date(s) Credit Card Issuer Paid
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Rent
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$182.24	(b) Date of Charge 07/11/2024
PAYEE	(a) Payee name Amazon	(c) Date(s) Credit Card Issuer Paid
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Payee address; City, State, Zip Code 5024 Devon Dr McKinney, TX 75070
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$208.94	(b) Date of Charge 07/23/2024
PAYEE	(a) Payee name Amazon	(c) Date(s) Credit Card Issuer Paid
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Payee address; City, State, Zip Code 410 Terry Ave Seattle, WA 98109
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$208.94	(b) Date of Charge 07/23/2024
PAYEE	(a) Payee name Amazon	(c) Date(s) Credit Card Issuer Paid
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Payee address; City, State, Zip Code 410 Terry Ave Seattle, WA 98109
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 2/13 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
4 CREDIT CARD ISSUER	Name of financial institution see previous	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 458.56
6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$254.90	(b) Date of Charge 08/13/2024
7 PAYEE	(a) Payee name Amazon	(c) Date(s) Credit Card Issuer Paid
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Office Supplies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$316.93	(b) Date of Charge 10/15/2024
PAYEE	(a) Payee name Amazon	(c) Date(s) Credit Card Issuer Paid
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Payee address; City, State, Zip Code 410 Terry Ave Seattle, WA 98109
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$415.89	(b) Date of Charge 07/23/2024
PAYEE	(a) Payee name Amazon	(c) Date(s) Credit Card Issuer Paid
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Payee address; City, State, Zip Code 410 Terry Ave Seattle, WA 98109
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 3/13 Rpt:	2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 458.56
6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$415.89	(b) Date of Charge 09/10/2024	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Amazon	(b) Payee address; City, State, Zip Code 410 Terry Ave Seattle, WA 98109	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Office Supplies
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$418.39	(b) Date of Charge 10/16/2024	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Amazon	(b) Payee address; City, State, Zip Code 410 Terry Ave Seattle, WA 98109	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Office Supplies
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$630.84	(b) Date of Charge 07/31/2024	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Amazon	(b) Payee address; City, State, Zip Code 410 Terry Ave Seattle, WA 98109	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Office Supplies
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By -	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Candidate/Officeholder/Political 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 F4: Sch: 4/13 Rpt:	2	FILER NAME Battleground Texas	3	Filer ID (Ethics Commission Filers) 00068897
4	CREDIT CARD ISSUER	Name of financial institution see previous		5	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 458.56
6	PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$863.93	(b) Date of Charge 08/14/2024	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name Amazon		(b) Payee address; City, State, Zip Code 410 Terry Ave Seattle, WA 98109	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Office Supplies	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
6	PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$130.48	(b) Date of Charge 09/01/2024	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name Google		(b) Payee address; City, State, Zip Code 1600 AMPHITHEATRE PKWY Mountain View, CA 94043	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Email, phone, cloud services	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
6	PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$130.48	(b) Date of Charge 10/01/2024	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name Google		(b) Payee address; City, State, Zip Code 1600 AMPHITHEATRE PKWY Mountain View, CA 94043	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Email, phone, cloud services	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 5/13 Rpt:	2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 458.56
6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$132.69	(b) Date of Charge 08/01/2024	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Google	(b) Payee address; City, State, Zip Code 1600 AMPHITHEATRE PKWY Mountain View, CA 94043	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Email, phone, cloud services
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$138.15	(b) Date of Charge 07/01/2024	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Google	(b) Payee address; City, State, Zip Code 1600 AMPHITHEATRE PKWY Mountain View, CA 94043	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Email, phone, cloud services
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$49.25	(b) Date of Charge 07/01/2024	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Google	(b) Payee address; City, State, Zip Code 1600 AMPHITHEATRE PKWY Mountain View, CA 94043	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Email, phone, cloud services
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 6/13 Rpt:	2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 CREDIT CARD ISSUER	Name of financial institution see previous	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 458.56
6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$49.60	(b) Date of Charge 08/01/2024	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Google	(b) Payee address; City, State, Zip Code 1600 AMPHITHEATRE PKWY Mountain View, CA 94043	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Email, phone, cloud services	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$49.60	(b) Date of Charge 09/01/2024	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Google	(b) Payee address; City, State, Zip Code 1600 AMPHITHEATRE PKWY Mountain View, CA 94043	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Email, phone, cloud services	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$49.60	(b) Date of Charge 10/01/2024	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Google	(b) Payee address; City, State, Zip Code 1600 AMPHITHEATRE PKWY Mountain View, CA 94043	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Email, phone, cloud services	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 7/13 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
4 CREDIT CARD ISSUER	Name of financial institution see previous	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 458.56
6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$95.94	(b) Date of Charge 07/01/2024
7 PAYEE	(a) Payee name Intuit - Quickbooks	(c) Date(s) Credit Card Issuer Paid
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description Accounting services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$105.53	(b) Date of Charge 08/01/2024
PAYEE	(a) Payee name Intuit - Quickbooks	(c) Date(s) Credit Card Issuer Paid
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Payee address; City, State, Zip Code 2632 Marine Way Mountain View, CA 94043
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$105.53	(b) Date of Charge 09/01/2024
PAYEE	(a) Payee name Intuit - Quickbooks	(c) Date(s) Credit Card Issuer Paid
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Payee address; City, State, Zip Code 2632 Marine Way Mountain View, CA 94043
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 8/13 Rpt:	2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 458.56
6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$105.53	(b) Date of Charge 10/01/2024	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Intuit - Quickbooks	(b) Payee address; City, State, Zip Code 2632 Marine Way Mountain View, CA 94043	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description Accounting services
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$49.96	(b) Date of Charge 07/15/2024	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Network Solutions	(b) Payee address; City, State, Zip Code 5335 Gate Pkw Jacksonville, FL 32256	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Domain subscription
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$49.96	(b) Date of Charge 08/12/2024	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Network Solutions	(b) Payee address; City, State, Zip Code 5335 Gate Pkw Jacksonville, FL 32256	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Domain subscription
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | 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 F4: Sch: 9/13 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
4 CREDIT CARD ISSUER	Name of financial institution see previous	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 458.56
6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$49.96	(b) Date of Charge 09/09/2024
7 PAYEE	(a) Payee name Network Solutions	(c) Date(s) Credit Card Issuer Paid
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Domain subscription
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
	Candidate/Officeholder name	Office sought Office held
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$49.96	(b) Date of Charge 10/07/2024
PAYEE	(a) Payee name Network Solutions	(c) Date(s) Credit Card Issuer Paid
	(b) Payee address; City, State, Zip Code 5335 Gate Pkw Jacksonville, FL 32256	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Domain subscription
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$92.54	(b) Date of Charge 09/06/2024
PAYEE	(a) Payee name Network Solutions	(c) Date(s) Credit Card Issuer Paid
	(b) Payee address; City, State, Zip Code 5335 Gate Pkw Jacksonville, FL 32256	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Domain subscription
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 10/13 Rpt:	2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 458.56
6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$100.00	(b) Date of Charge 08/14/2024	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Quiktrip	(b) Payee address; City, State, Zip Code 4705 South 129th East Avenue Tulsa, OK 74134	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description Gas cards for staff
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$200.00	(b) Date of Charge 07/03/2024	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Quiktrip	(b) Payee address; City, State, Zip Code 4705 South 129th East Avenue Tulsa, OK 74134	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description Gas cards for staff
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$200.00	(b) Date of Charge 07/10/2024	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Quiktrip	(b) Payee address; City, State, Zip Code 4705 South 129th East Avenue Tulsa, OK 74134	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description Gas cards for staff
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 11/13 Rpt:		2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897	
4 CREDIT CARD ISSUER		Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 458.56	
6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds		(a) Amount Charged \$400.00	(b) Date of Charge 07/03/2024	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE		(a) Payee name Quiktrip		(b) Payee address; City, State, Zip Code 4705 South 129th East Avenue Tulsa, OK 74134	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description Gas cards for staff	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
				Office held	
PAYMENT <input type="checkbox"/> Expenditure from corporate funds		(a) Amount Charged \$50.00	(b) Date of Charge 10/13/2024	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name American Express		(b) Payee address; City, State, Zip Code 200 Vesey St New York, NY 10285	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Creditcard annual fee	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
				Office held	
PAYMENT <input type="checkbox"/> Expenditure from corporate funds		(a) Amount Charged \$383.63	(b) Date of Charge 07/22/2024	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name SiteGround		(b) Payee address; City, State, Zip Code 700 N. Fairfax St, Suite 614 Alexandria, VA 22314	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Website services	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
				Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 12/13 Rpt:	2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 458.56
6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$204.95	(b) Date of Charge 07/17/2024	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Vanillagift.com	(b) Payee address; City, State, Zip Code 250 Williams St NW # 5 Atlanta, GA 30303	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description gift card for staff travel
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$9.71	(b) Date of Charge 08/14/2024	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Walmart	(b) Payee address; City, State, Zip Code 2525 W Anderson Ln Austin, TX 78757	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Office Supplies
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$13.53	(b) Date of Charge 08/14/2024	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Walmart	(b) Payee address; City, State, Zip Code 2525 W Anderson Ln Austin, TX 78757	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Office Supplies
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 13/13 Rpt:	2 FILER NAME Battleground Texas	3 Filer ID (Ethics Commission Filers) 00068897
4 CREDIT CARD ISSUER	Name of financial institution see previous	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 458.56
6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$57.77	(b) Date of Charge 08/14/2024
7 PAYEE	(a) Payee name Walmart	(c) Date(s) Credit Card Issuer Paid
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Office Supplies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
PAYMENT <input type="checkbox"/> Expenditure from corporate funds	(a) Amount Charged \$315.77	(b) Date of Charge 10/15/2024
PAYEE	(a) Payee name Walmart	(c) Date(s) Credit Card Issuer Paid
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
	Candidate/Officeholder name Office sought Office held	

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 1/1 Rpt: 173/173
2 FILER NAME Battleground Texas		3 Filer ID (Ethics Commission Filers) 00068897
4 Date 10/19/2024	5 Name of person from whom amount is received Amazon	8 Amount (\$) \$7.57
6 Address of person from whom amount is received; City; State; Zip Code Seattle, WA 98109		
7 Purpose for which amount is received Refund <input type="checkbox"/> Check if political contribution returned to filer		
Date 09/17/2024	5 Name of person from whom amount is received Texas Tool Belt LLC	8 Amount (\$) \$3,960.00
6 Address of person from whom amount is received; City; State; Zip Code Houston, TX 77087		
7 Purpose for which amount is received Refund for overpayment <input type="checkbox"/> Check if political contribution returned to filer		