

# CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1 Filer ID (Ethics Commission Filers) 00088068		2 Total pages filed: 48		<b>OFFICE USE ONLY</b>	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Ms.	FIRST Katherine	MI MI	Date Received <b>ELECTRONICALLY FILED</b> 10/28/2024	
	NICKNAME	LAST Culbert	SUFFIX		
4 ORIGINAL REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other (specify)	Date Hand-delivered or Date Postmarked	
	<input type="checkbox"/> July 15	<input type="checkbox"/> Exceeded modified reporting limit			
	<input checked="" type="checkbox"/> 30th day before election	<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)		Receipt #	Amount
	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Final Report (Attach C/OH-FR)		Date Processed	
5 ORIGINAL PERIOD COVERED	Month Day Year 07/01/2024	THROUGH	Month Day Year 09/26/2024	Date Imaged	

6 EXPLANATION OF CORRECTION  
 Changed Blue Horizon Texas PAC from notification to in-kind contribution

7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

**Semiannual reports:** I swear, or affirm that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

**Other reports:** I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Ms. Katherine Culbert

\_\_\_\_\_  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

**Remember To Attach Any Part Of The Campaign Finance Report Form  
Needed To Report And Explain Corrections**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

<b>The C/OH Instruction Guide explains how to complete this form.</b>		<b>1 Filer ID</b> (Ethics Commission Filers) 00088068	<b>2 Total pages filed:</b> 48				
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	MS / MRS / MR Ms.	FIRST Katherine	MI MI	<b>OFFICE USE ONLY</b>			
	NICKNAME	LAST Culbert	SUFFIX		Date Received <b>ELECTRONICALLY FILED</b> 10/28/2024		
<b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b>  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 1919 Taylor St. #1670 Suite F  Houston, TX 77007			Date Hand-delivered or Date Postmarked			
				Receipt # _____ Amount _____			
				Date Processed _____			
				Date Imaged _____			
<b>5 CAMPAIGN TREASURER NAME</b>	MS / MRS / MR Mr.	FIRST Lou	MI MI				
	NICKNAME	LAST Weaver	SUFFIX				
<b>6 CAMPAIGN TREASURER ADDRESS</b>  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1609 Castle Ct. #1  Houston, TX 77006						
<b>7 CAMPAIGN TREASURER PHONE</b>	AREA CODE	PHONE NUMBER	EXTENSION				
	(832)	265-0342					
<b>8 REPORT TYPE</b>	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)						
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)						
<b>9 PERIOD COVERED</b>	Month	Day	Year	THROUGH	Month	Day	Year
	07	01	2024		09	26	2024
<b>10 ELECTION</b>	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			
<b>11 OFFICE</b>	OFFICE HELD (if any) Railroad Commissioner			<b>12 OFFICE SOUGHT (if known)</b> Railroad Commissioner			

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# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

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<b>13 C / OH NAME</b> Culbert, Katherine (Ms.)	<b>14 Filer ID</b> (Ethics Commission Filers) 00088068
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<b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b>  <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	<b>COMMITTEE TYPE</b>  <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	<b>COMMITTEE NAME</b>  <hr/> <b>COMMITTEE ADDRESS</b>  <hr/> <b>COMMITTEE CAMPAIGN TREASURER NAME</b>  <hr/> <b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>  <hr/>

<b>16 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 12,052.61
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$ 10,059.57
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 2,773.98
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 2,400.00

**17 AFFIDAVIT**

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

Ms. Katherine Culbert  
 \_\_\_\_\_  
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

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

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<b>18 FILER NAME</b> Culbert, Katherine (Ms.)		<b>19 Filer ID</b> 00088068	(Ethics Commission Filers)
<b>20 SCHEDULE SUBTOTALS</b>			<b>SUBTOTAL AMOUNT</b>
NAME OF SCHEDULE			
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	11,952.61
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	100.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$	
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	2,163.26
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	7,896.31
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/33 Rpt: 5/48
<b>2</b> FILER NAME Culbert, Katherine (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088068
<b>4</b> Date 09/06/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Anderson, Clifford <hr/> <b>6</b> Contributor address; City; State; Zip Code  Cedar Park, TX 78613	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Aronson, Harvey <hr/> Contributor address; City; State; Zip Code  Houston, TX 77005	Amount of Contribution (\$)  \$18.00
Principal occupation / Job title (See Instructions) Psychotherapist		Employer (See Instructions) Self
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bain, Linda <hr/> Contributor address; City; State; Zip Code  Needville, TX 77461	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Travel agent		Employer (See Instructions) Frosch travel
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barrett, Sean <hr/> Contributor address; City; State; Zip Code  Cheltenham, PA 19012	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) Planning Manager		Employer (See Instructions) Tastepoint by IFF
Date 09/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barth, Aaron <hr/> Contributor address; City; State; Zip Code  Irvine, CA 92617	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Scientist		Employer (See Instructions) University of California Irvine

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/33 Rpt: 6/48
<b>2</b> FILER NAME Culbert, Katherine (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088068
<b>4</b> Date 08/06/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bedi, Sheetal <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77081	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Executive Director		<b>9</b> Employer (See Instructions) Indo-American Association Houston
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Berg, Phyllis <hr/> Contributor address; City; State; Zip Code  Midlothian, VA 23113-2173	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Berthold, Patricia <hr/> Contributor address; City; State; Zip Code  Bakersfield, CA 93314	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Blust, Christina <hr/> Contributor address; City; State; Zip Code  Washington, DC 20016	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Admin		Employer (See Instructions) Cypress Group LLC
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) COX, Carol <hr/> Contributor address; City; State; Zip Code  Renton, WA 98056	Amount of Contribution (\$)  \$4.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/33 Rpt: 7/48
<b>2</b> FILER NAME Culbert, Katherine (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088068
<b>4</b> Date 07/26/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cain, Cherie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Glastonbury, CT 06033-1286	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Engineer		<b>9</b> Employer (See Instructions) RTX
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Candland, Ryan <hr/> Contributor address; City; State; Zip Code  Salt Lake City, UT 84109	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Patent Examiner		Employer (See Instructions) IPONZ
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carver, Catherine <hr/> Contributor address; City; State; Zip Code  Finger, TN 38334	Amount of Contribution (\$)  \$1.30
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chang, Elizabeth <hr/> Contributor address; City; State; Zip Code  Frederick, MD 21702	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Hood College
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chapin, Steve <hr/> Contributor address; City; State; Zip Code  Concord, CA 94518	Amount of Contribution (\$)  \$4.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Berkeley Research Group

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/33 Rpt: 8/48
<b>2</b> FILER NAME Culbert, Katherine (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088068
<b>4</b> Date 08/19/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Collins, Jennifer <hr/> <b>6</b> Contributor address; City; State; Zip Code  Wellesley, MA 02482	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Collins, Melanie <hr/> Contributor address; City; State; Zip Code  Austin, TX 78746	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Central texas obgyn
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cotter, Ann <hr/> Contributor address; City; State; Zip Code  Cincinnati, OH 45229	Amount of Contribution (\$)  \$1.36
Principal occupation / Job title (See Instructions) Writer/Editor		Employer (See Instructions) Self
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Culbert, James <hr/> Contributor address; City; State; Zip Code  Jacksonville, FL 32257	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) CIO		Employer (See Instructions) Duval County Public Schools
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Culbert, Michael <hr/> Contributor address; City; State; Zip Code  Los Angeles, CA 90066	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) writer		Employer (See Instructions) Steakhead Productions



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/33 Rpt: 9/48
<b>2</b> FILER NAME Culbert, Katherine (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088068
<b>4</b> Date 09/13/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cy-Fair Area Democratic Club	<b>7</b> Amount of Contribution (\$) \$150.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77077		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Daniluk, Judy	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  Flower Mound, TX 75022		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Darrat, Inaas	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  Houston, TX 77007		
Principal occupation / Job title (See Instructions) Chemical Engineer		Employer (See Instructions) Trinity Consultants
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) DasGupta, Bhaskar	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Chicago, IL 60607		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) UIC
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Deddens, Ross	Amount of Contribution (\$) \$1.36
Contributor address; City; State; Zip Code  Sterling, VA 20164		
Principal occupation / Job title (See Instructions) Cybersecurity Analyst		Employer (See Instructions) SOSi LLC

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/33 Rpt: 10/48
<b>2</b> FILER NAME Culbert, Katherine (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088068
<b>4</b> Date 08/21/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Democratic Women of Comal County	<b>7</b> Amount of Contribution (\$) \$250.00
<b>6</b> Contributor address; City; State; Zip Code  New Braunfels, TX 78130		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Engel, Clayton	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  STILLWATER, MN 55082		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Falk, Benjamin	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Washington, DC 20002		
Principal occupation / Job title (See Instructions) Development		Employer (See Instructions) Urban Institute
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fraker, Paul	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code  Lovettsville, VA 20180		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gambill, Lauren	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Austin, TX 78723		
Principal occupation / Job title (See Instructions) Pediatric Hospitalist		Employer (See Instructions) Ascension

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/33 Rpt: 11/48
<b>2</b> FILER NAME Culbert, Katherine (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088068
<b>4</b> Date 07/22/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garcia, Manuel A <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78750-3866	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions) Not employed
Date 07/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) George, Alexandra <hr/> Contributor address; City; State; Zip Code  Austin, TX 78722	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Austin Rise School
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Glerum, Katrina <hr/> Contributor address; City; State; Zip Code  Santa Clara, CA 95054	Amount of Contribution (\$)  \$3.84
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gold, Dean <hr/> Contributor address; City; State; Zip Code  Baltimore, MD 21230	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Goldsobel, Antonia <hr/> Contributor address; City; State; Zip Code  Los Angeles, CA 90049	Amount of Contribution (\$)  \$4.00
Principal occupation / Job title (See Instructions) administrator		Employer (See Instructions) Law Offices of Steven Goldsobel

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/33 Rpt: 12/48
<b>2</b> FILER NAME Culbert, Katherine (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088068
<b>4</b> Date 08/16/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gonzalez, Aaron <hr/> <b>6</b> Contributor address; City; State; Zip Code  Ropesville, TX 79358	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Marketer		<b>9</b> Employer (See Instructions) Outlier
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gordon, Jeffrey <hr/> Contributor address; City; State; Zip Code  New York, NY 10025	Amount of Contribution (\$)  \$3.84
Principal occupation / Job title (See Instructions) professor		Employer (See Instructions) columbia univ
Date 07/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gordon, William S <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) real estate appraiser		Employer (See Instructions) self
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gordon, William S <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) real estate appraiser		Employer (See Instructions) self
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gordon, William S <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) real estate appraiser		Employer (See Instructions) self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/33 Rpt: 13/48
<b>2</b> FILER NAME Culbert, Katherine (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088068
<b>4</b> Date 09/03/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Graves, Anna	<b>7</b> Amount of Contribution (\$)  \$2.00
<b>6</b> Contributor address; City; State; Zip Code  Oakland, CA 94612		
<b>8</b> Principal occupation / Job title (See Instructions) Librarian		<b>9</b> Employer (See Instructions) Oakland Public Library
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Grischy, Kathryn	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Arroyo Grande, CA 93420		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Grisham, Robin	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Georgetown, TX 78628		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) HAMILL, Samuel	Amount of Contribution (\$)  \$20.00
Contributor address; City; State; Zip Code  FORT WORTH, TX 76179		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) HAMILL, Samuel	Amount of Contribution (\$)  \$5.00
Contributor address; City; State; Zip Code  FORT WORTH, TX 76179		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/33 Rpt: 14/48
<b>2</b> FILER NAME Culbert, Katherine (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088068
<b>4</b> Date 07/31/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) HAMILL, Samuel	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>6</b> Contributor address; City; State; Zip Code  FORT WORTH, TX 76179		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 08/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) HAMILL, Samuel	Amount of Contribution (\$)  \$20.00
Contributor address; City; State; Zip Code  FORT WORTH, TX 76179		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) HAMILL, Samuel	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  FORT WORTH, TX 76179		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) HAMILL, Samuel	Amount of Contribution (\$)  \$20.00
Contributor address; City; State; Zip Code  FORT WORTH, TX 76179		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Haggarty, Heather	Amount of Contribution (\$)  \$1.36
Contributor address; City; State; Zip Code  Piedmont, CA 94611		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Pritzker Levine

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/33 Rpt: 15/48
<b>2</b> FILER NAME Culbert, Katherine (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088068
<b>4</b> Date 07/23/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Haley, Margo	<b>7</b> Amount of Contribution (\$) \$250.00
<b>6</b> Contributor address; City; State; Zip Code  Georgetown, TX 78633		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 07/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harrison, Paul	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Austin, TX 78748		
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) Dosespot
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harrison, Paul	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Austin, TX 78748		
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) Dosespot
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harrison, Paul	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Austin, TX 78748		
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) Dosespot
Date 07/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hartsook, Deanna	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code  Austin, TX 78705		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Blackbaud

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/33 Rpt: 16/48
<b>2</b> FILER NAME Culbert, Katherine (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088068
<b>4</b> Date 08/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartsook, Deanna	<b>7</b> Amount of Contribution (\$) \$10.00
<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78705		
<b>8</b> Principal occupation / Job title (See Instructions) Software Engineer		<b>9</b> Employer (See Instructions) Blackbaud
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartsook, Deanna	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Austin, TX 78705		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Blackbaud
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartsough, Lucas	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Watertown, MA 02472		
Principal occupation / Job title (See Instructions) Computational Biologist		Employer (See Instructions) Ginkgo Bioworks Inc
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartsough, Lucas	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Watertown, MA 02472		
Principal occupation / Job title (See Instructions) Computational Biologist		Employer (See Instructions) Ginkgo Bioworks Inc
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hausman, Margaret (Peg)	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code  Bloomington, IN 47408		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/33 Rpt: 17/48
<b>2</b> FILER NAME Culbert, Katherine (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088068
<b>4</b> Date 07/07/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Henning, Kevin	<b>7</b> Amount of Contribution (\$) \$250.00
<b>6</b> Contributor address; City; State; Zip Code  Boerne, TX 78006		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Henry, LaRue	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Dallas, TX 75209		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Houck, Marcia	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Houston, TX 77062		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Huie, Robert	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code  Beeville, TX 78102		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Huth, Jesse	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Wimberley, TX 78676		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/33 Rpt: 18/48
<b>2</b> FILER NAME Culbert, Katherine (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088068
<b>4</b> Date 08/17/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Huth, Jesse	<b>7</b> Amount of Contribution (\$)  \$1.00
<b>6</b> Contributor address; City; State; Zip Code  Wimberley, TX 78676		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jackson, Ashley Elizabeth	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code  San Antonio, TX 78258		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Joseph, Robert	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  Tomball, TX 77375		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Joseph, Robert	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Tomball, TX 77375		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Josserand, Earl	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Euless, TX 76039		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 15/33 Rpt: 19/48
<b>2</b> FILER NAME Culbert, Katherine (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088068
<b>4</b> Date 09/18/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kamuchey, Cassandra	<b>7</b> Amount of Contribution (\$) \$4.26
<b>6</b> Contributor address; City; State; Zip Code  San Jose, CA 95124		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kaufman, Jeff	Amount of Contribution (\$) \$1.36
Contributor address; City; State; Zip Code  Wilmington, DE 19806		
Principal occupation / Job title (See Instructions) Copywriter		Employer (See Instructions) Self-employed
Date 08/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kempner, Harris	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code  Galveston, TX 77553		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kinman, Gary R.	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Lakeway, TX 78738		
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions) ASI
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Knauth, Tonya	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code  Houston, TX 77018		
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 16/33 Rpt: 20/48
<b>2</b> FILER NAME Culbert, Katherine (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088068
<b>4</b> Date 08/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Koym-Garza, Mario	<b>7</b> Amount of Contribution (\$) \$100.00
<b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75248		
<b>8</b> Principal occupation / Job title (See Instructions) Data Scientist		<b>9</b> Employer (See Instructions) Precocity LLC
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Koym-Garza, Mario	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  Dallas, TX 75248		
Principal occupation / Job title (See Instructions) Data Scientist		Employer (See Instructions) Precocity LLC
Date 07/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kuo, Ellen	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Pearland, TX 77584		
Principal occupation / Job title (See Instructions) Physician Assistant		Employer (See Instructions) Self
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lahey, Marieke	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Houston, TX 77006		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) ExxonMobil
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lahey, Marieke	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Houston, TX 77006		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) ExxonMobil

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 17/33 Rpt: 21/48
<b>2</b> FILER NAME Culbert, Katherine (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088068
<b>4</b> Date 08/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Larkin, Kraig	<b>7</b> Amount of Contribution (\$) \$4.00
<b>6</b> Contributor address; City; State; Zip Code  Cohoes, NY 12047		
<b>8</b> Principal occupation / Job title (See Instructions) Educator		<b>9</b> Employer (See Instructions) Siena
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Larson, Jacqueline	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code  San Diego, CA 92127		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Luz, Lydia	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Houston, TX 77005		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lynch, Jennifer	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Essex Junction, VT 05452		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Majovsky, Ras	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  South San Francisco, CA 94080		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Roche

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 18/33 Rpt: 22/48
<b>2</b> FILER NAME Culbert, Katherine (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088068
<b>4</b> Date 08/12/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mangan, John	<b>7</b> Amount of Contribution (\$) \$4.00
<b>6</b> Contributor address; City; State; Zip Code  Pine Grove, CA 95665		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 09/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Marhenke, Lazarus	Amount of Contribution (\$) \$7.69
Contributor address; City; State; Zip Code  San Jose, CA 95125		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Marler, Sunny	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Midland, TX 79703		
Principal occupation / Job title (See Instructions) Clerk		Employer (See Instructions) Credit union
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Marlowe, Thomas	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code  Rahway, NJ 07065		
Principal occupation / Job title (See Instructions) Professor Emeritus		Employer (See Instructions) Seton Hall University
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Marlowe, Thomas	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code  Rahway, NJ 07065		
Principal occupation / Job title (See Instructions) Professor Emeritus		Employer (See Instructions) Seton Hall University

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 19/33 Rpt: 23/48
<b>2</b> FILER NAME Culbert, Katherine (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088068
<b>4</b> Date 07/31/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mayberry, Laura <hr/> <b>6</b> Contributor address; City; State; Zip Code  AUSTIN, TX 78737	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McAuliffe, Kevin <hr/> Contributor address; City; State; Zip Code  Jamesville, NY 13078	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Barclay Damon LLP
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McEwen, Joan <hr/> Contributor address; City; State; Zip Code  Lexington, KY 40502	Amount of Contribution (\$)  \$3.84
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mellon, Robert <hr/> Contributor address; City; State; Zip Code  Tucson, AZ 85701	Amount of Contribution (\$)  \$15.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Merugumala, Praveen <hr/> Contributor address; City; State; Zip Code  La Marque, TX 77568	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Texas Children's

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 20/33 Rpt: 24/48
<b>2</b> FILER NAME Culbert, Katherine (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088068
<b>4</b> Date 08/31/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Miller, Nathan <hr/> <b>6</b> Contributor address; City; State; Zip Code  Germantown, MD 20874	<b>7</b> Amount of Contribution (\$)  \$2.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Millet, Marilyn <hr/> Contributor address; City; State; Zip Code  Houston, TX 77059	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Self employed self		Employer (See Instructions) Self
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mirkovic, Nena <hr/> Contributor address; City; State; Zip Code  Spring, TX 77382	Amount of Contribution (\$)  \$4.00
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) Millennium
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Monjure, Noel <hr/> Contributor address; City; State; Zip Code  Cypress, TX 77429	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Moore, Mary Annis <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78212	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 21/33 Rpt: 25/48
<b>2</b> FILER NAME Culbert, Katherine (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088068
<b>4</b> Date 08/30/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nacogdoches County Democratic Party	<b>7</b> Amount of Contribution (\$) \$100.00
<b>6</b> Contributor address; City; State; Zip Code  Nacogdoches, TX 75961		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nunez, Irene	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Spring, TX 77388		
Principal occupation / Job title (See Instructions) Communications		Employer (See Instructions) Self employed
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Otey, Lisa	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code  League City, TX 77583		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Otis, Gary	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Somerville, TX 77879		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Packman, Bryan	Amount of Contribution (\$) \$1.92
Contributor address; City; State; Zip Code  New York, NY 10014		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Adobe

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 22/33 Rpt: 26/48
<b>2</b> FILER NAME Culbert, Katherine (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088068
<b>4</b> Date 07/19/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Parrish, Anne Thatcher <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78209	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Patel, Kavita <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Patterson, Kelly <hr/> Contributor address; City; State; Zip Code  Houston, TX 77057	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Perez, Antoinette <hr/> Contributor address; City; State; Zip Code  Kyle, TX 78640	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Wednesday Workshop Inc.
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pervier, Stephen <hr/> Contributor address; City; State; Zip Code  Austin, TX 78759	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 23/33 Rpt: 27/48
<b>2</b> FILER NAME Culbert, Katherine (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088068
<b>4</b> Date 07/26/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Phillips, Dale <hr/> <b>6</b> Contributor address; City; State; Zip Code  Huntsville, TX 77320	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Puckett, Robert <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75208	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Real Estate Broker		Employer (See Instructions) Self
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pyle, Suanne <hr/> Contributor address; City; State; Zip Code  Boerne, TX 78006	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Quick, Holly <hr/> Contributor address; City; State; Zip Code  Nashville TN, TN 37204	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Quick, Holly <hr/> Contributor address; City; State; Zip Code  Nashville, TN 37204	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 24/33 Rpt: 28/48
<b>2</b> FILER NAME Culbert, Katherine (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088068
<b>4</b> Date 08/06/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Quittner, Claudia <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75252	<b>7</b> Amount of Contribution (\$)  \$36.00
<b>8</b> Principal occupation / Job title (See Instructions) Research NURse		<b>9</b> Employer (See Instructions) UT Southwestern Medical Center
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) RUSSELL, ANDY <hr/> Contributor address; City; State; Zip Code  Bolton Lndg, NY 12814	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) NY State
Date 08/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rambow, Frederick <hr/> Contributor address; City; State; Zip Code  Houston, TX 77081-7402	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramirez, Brayan <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78223	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Cook		Employer (See Instructions) Mi Tierra
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Raskopf, Vaune <hr/> Contributor address; City; State; Zip Code  FT WORTH, TX 76109	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 25/33 Rpt: 29/48
<b>2</b> FILER NAME Culbert, Katherine (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088068
<b>4</b> Date 09/18/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rasmussen, Harold <hr/> <b>6</b> Contributor address; City; State; Zip Code  Midland, TX 79701	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Petroleum Engineer		<b>9</b> Employer (See Instructions) Self
Date 07/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reed, Richard <hr/> Contributor address; City; State; Zip Code  Schenectady, NY 12302	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Roberts-Miller, Jimmy <hr/> Contributor address; City; State; Zip Code  Austin, TX 78757	Amount of Contribution (\$)  \$38.46
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robinson, Michael <hr/> Contributor address; City; State; Zip Code  Baltimore, MD 21218	Amount of Contribution (\$)  \$1.36
Principal occupation / Job title (See Instructions) Systems Engineer		Employer (See Instructions) AURA
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robinson, Michael <hr/> Contributor address; City; State; Zip Code  Baltimore, MD 21218	Amount of Contribution (\$)  \$1.36
Principal occupation / Job title (See Instructions) Systems Engineer		Employer (See Instructions) AURA

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 26/33 Rpt: 30/48
<b>2</b> FILER NAME Culbert, Katherine (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088068
<b>4</b> Date 09/14/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Robinson, Michael <hr/> <b>6</b> Contributor address; City; State; Zip Code  Baltimore, MD 21218	<b>7</b> Amount of Contribution (\$)  \$1.36
<b>8</b> Principal occupation / Job title (See Instructions) Systems Engineer		<b>9</b> Employer (See Instructions) AURA
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rundstein, Richard <hr/> Contributor address; City; State; Zip Code  Wilmington, DE 19810	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sachter, Joseph <hr/> Contributor address; City; State; Zip Code  Bronx, NY 10471-1804	Amount of Contribution (\$)  \$1.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sayler, Jason <hr/> Contributor address; City; State; Zip Code  SAN JOSE, CA 95123	Amount of Contribution (\$)  \$4.00
Principal occupation / Job title (See Instructions) legal videographer		Employer (See Instructions) self
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schoonover, Ruth <hr/> Contributor address; City; State; Zip Code  Spring, TX 77380	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 27/33 Rpt: 31/48
<b>2</b> FILER NAME Culbert, Katherine (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088068
<b>4</b> Date 08/25/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwalls, Hope <hr/> <b>6</b> Contributor address; City; State; Zip Code  Fort Worth, TX 76123	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Engineer		<b>9</b> Employer (See Instructions) Lockheed Martin
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwartz, Terralyn <hr/> Contributor address; City; State; Zip Code  Riverside, CA 92506	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Controller		Employer (See Instructions) Shea Properties
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Tom <hr/> Contributor address; City; State; Zip Code  Houston, TX 77005	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Chamberlain Hrdlicka
Date 07/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shea, Evalyn <hr/> Contributor address; City; State; Zip Code  Houston, TX 77096	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Shea Writing and Training Solutions Inc.
Date 08/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shea, Evalyn <hr/> Contributor address; City; State; Zip Code  Houston, TX 77096	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Technical Writing		Employer (See Instructions) Shea Writing and Training Solutions Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 28/33 Rpt: 32/48
<b>2</b> FILER NAME Culbert, Katherine (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088068
<b>4</b> Date 07/26/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Simpson, Sherry	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77006		
<b>8</b> Principal occupation / Job title (See Instructions) Not employed		<b>9</b> Employer (See Instructions) Not employed
Date 08/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sponberg, Edward	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code  HOUSTON, TX 77081		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Steves, Buddy	Amount of Contribution (\$)  \$1,000.00
Contributor address; City; State; Zip Code  Houston, TX 77030		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stewart, Kenneth	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Bandera, TX 78003		
Principal occupation / Job title (See Instructions) nurse		Employer (See Instructions) rockledge regional med ctr
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sutton, Eliza	Amount of Contribution (\$)  \$20.83
Contributor address; City; State; Zip Code  Seattle, WA 98112-3266		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 29/33 Rpt: 33/48
<b>2</b> FILER NAME Culbert, Katherine (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088068
<b>4</b> Date 08/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sweet, Dana <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77007	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Energy Infrastructure		<b>9</b> Employer (See Instructions) Grid United
Date 09/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Tanous, Jean <hr/> Contributor address; City; State; Zip Code  Austin, TX 78735	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Taylor, Robert <hr/> Contributor address; City; State; Zip Code  Bedford, TX 76021	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Taylor, Robert <hr/> Contributor address; City; State; Zip Code  Bedford, TX 76021	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Taylor, Robert <hr/> Contributor address; City; State; Zip Code  Bedford, TX 76021	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 30/33 Rpt: 34/48
<b>2</b> FILER NAME Culbert, Katherine (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088068
<b>4</b> Date 09/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teate, Renee	<b>7</b> Amount of Contribution (\$)  \$1.60
<b>6</b> Contributor address; City; State; Zip Code  Harrisonburg, VA 22801-9046		
<b>8</b> Principal occupation / Job title (See Instructions) Data Scientist		<b>9</b> Employer (See Instructions) HelioCampus
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas AFL-CIO COPE	Amount of Contribution (\$)  \$1,000.00
Contributor address; City; State; Zip Code  Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Democratic Women	Amount of Contribution (\$)  \$1,000.00
Contributor address; City; State; Zip Code  Austin, TX 78703		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomason, Heidi	Amount of Contribution (\$)  \$19.76
Contributor address; City; State; Zip Code  San Antonio, TX 78248		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tuohy, Jamie	Amount of Contribution (\$)  \$1.00
Contributor address; City; State; Zip Code  Wake Forest, NC 27587		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 31/33 Rpt: 35/48
<b>2</b> FILER NAME Culbert, Katherine (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088068
<b>4</b> Date 08/14/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Vellella, Vincent <hr/> <b>6</b> Contributor address; City; State; Zip Code  Santa Fe, TX 77510	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) IT Specialist		<b>9</b> Employer (See Instructions) Dunn Heat Exchangers Inc.
<b>Date</b> 08/18/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Vigevano, Heather <hr/> <b>Contributor address; City; State; Zip Code</b>  Somerville, MA 02143	<b>Amount of Contribution (\$)</b>  \$25.00
<b>Principal occupation / Job title (See Instructions)</b> IT		<b>Employer (See Instructions)</b> University of Colorado Denver
<b>Date</b> 09/22/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Votaw, Vernon <hr/> <b>Contributor address; City; State; Zip Code</b>  Mountlake Terrace, WA 98043	<b>Amount of Contribution (\$)</b>  \$38.46
<b>Principal occupation / Job title (See Instructions)</b> Software Engineer		<b>Employer (See Instructions)</b> Microsoft
<b>Date</b> 08/15/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Weinstein, Eliot <hr/> <b>Contributor address; City; State; Zip Code</b>  Chicago, IL 60615	<b>Amount of Contribution (\$)</b>  \$40.00
<b>Principal occupation / Job title (See Instructions)</b> Graduate Student		<b>Employer (See Instructions)</b> University of Chicago
<b>Date</b> 08/27/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Weiss, Joseph <hr/> <b>Contributor address; City; State; Zip Code</b>  Houston, TX 77041	<b>Amount of Contribution (\$)</b>  \$100.00
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b> Retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 32/33 Rpt: 36/48
<b>2</b> FILER NAME Culbert, Katherine (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088068
<b>4</b> Date 08/25/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wheless, Rebecca <hr/> <b>6</b> Contributor address; City; State; Zip Code  Lynnwood, WA 98036	<b>7</b> Amount of Contribution (\$)  \$30.00
<b>8</b> Principal occupation / Job title (See Instructions) Circulation		<b>9</b> Employer (See Instructions) Beacon Publishing
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wright, Christine <hr/> Contributor address; City; State; Zip Code  Ballston Spa, NY 12020	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Advertising Services Manager		Employer (See Instructions) Times Union
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wright, Christine <hr/> Contributor address; City; State; Zip Code  Ballston Spa, NY 12020	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Advertising Services Manager		Employer (See Instructions) Times Union
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wright, Christine <hr/> Contributor address; City; State; Zip Code  Ballston Spa, NY 12020	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Advertising Services Manager		Employer (See Instructions) Times Union
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Yates, Nancy <hr/> Contributor address; City; State; Zip Code  Hamilton, TX 76531	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 33/33 Rpt: 37/48
<b>2</b> FILER NAME Culbert, Katherine (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088068
<b>4</b> Date 09/17/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zwiebel, Richard	<b>7</b> Amount of Contribution (\$)  \$9.61
<b>6</b> Contributor address; City; State; Zip Code  Boulder, CO 80302		
<b>8</b> Principal occupation / Job title (See Instructions) vp		<b>9</b> Employer (See Instructions) QSC
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zwiebel, Richard	Amount of Contribution (\$)  \$3.84
Contributor address; City; State; Zip Code  Boulder, CO 80302		
Principal occupation / Job title (See Instructions) vp		Employer (See Instructions) QSC
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) gardner, terry	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code  Santa Ana, CA 92705		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) johnson, Alida	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code  Missouri City, TX 77459		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) zucco, frank	Amount of Contribution (\$)  \$3.84
Contributor address; City; State; Zip Code  castle rock, CO 80104		
Principal occupation / Job title (See Instructions) Sales Manager		Employer (See Instructions) Wanco Inc.

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A2: Sch: 1/1 Rpt: 38/48	
<b>2</b> FILER NAME Culbert, Katherine (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088068	
<b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		<b>\$</b>	
<b>5</b> Date 09/03/2024	<b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blue Horizon Texas PAC ----- <b>7</b> Contributor address; City; State; Zip Code  San Antonio, TX 78278	<b>8</b> Amount of contribution (\$) \$100.00	<b>9</b> In-kind contribution description Strategy session, endorsement, social media, email promotion  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
<b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		<b>11</b> Employer (FOR NON-JUDICIAL) (See instructions)	
<b>12</b> Contributor's principal occupation (FOR JUDICIAL)		<b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions)	
<b>14</b> Contributor's employer/law firm (FOR JUDICIAL)		<b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
<b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/5 Rpt: 39/48	<b>2</b> FILER NAME Culbert, Katherine (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00088068
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<b>4</b> Date 07/07/2024	<b>5</b> Payee name ActBlue
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<b>6</b> Amount (\$) \$18.98	<b>7</b> Payee address; City; State; Zip Code 366 Summer St  Somerville, MA 02144
---------------------------------	--

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

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/14/2024	Payee name ActBlue
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Amount (\$) \$3.45	Payee address; City; State; Zip Code 366 Summer St  Somerville, MA 02144
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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 fee
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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 07/21/2024	Payee name ActBlue
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Amount (\$) \$18.78	Payee address; City; State; Zip Code 366 Summer St  Somerville, MA 02144
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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 fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/5 Rpt: 40/48	<b>2</b> FILER NAME Culbert, Katherine (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00088068
<b>4</b> Date 07/28/2024	<b>5</b> Payee name ActBlue	
<b>6</b> Amount (\$) \$35.39	<b>7</b> Payee address; City; State; Zip Code 366 Summer St  Somerville, MA 02144	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fee
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 08/04/2024	Payee name ActBlue	
Amount (\$) \$51.17	Payee address; City; State; Zip Code 366 Summer St  Somerville, MA 02144	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 08/11/2024	Payee name ActBlue	
Amount (\$) \$23.08	Payee address; City; State; Zip Code 366 Summer St  Somerville, MA 02144	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/5 Rpt: 41/48	<b>2</b> FILER NAME Culbert, Katherine (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00088068
<b>4</b> Date 08/18/2024	<b>5</b> Payee name ActBlue	
<b>6</b> Amount (\$) \$12.36	<b>7</b> Payee address; City; State; Zip Code 366 Summer St  Somerville, MA 02144	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fee
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 08/25/2024	Payee name ActBlue	
Amount (\$) \$9.53	Payee address; City; State; Zip Code 366 Summer St  Somerville, MA 02144	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 09/01/2024	Payee name ActBlue	
Amount (\$) \$35.26	Payee address; City; State; Zip Code 366 Summer St  Somerville, MA 02144	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/5 Rpt: 42/48	<b>2</b> FILER NAME Culbert, Katherine (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00088068
<b>4</b> Date 09/08/2024	<b>5</b> Payee name ActBlue	
<b>6</b> Amount (\$) \$23.47	<b>7</b> Payee address; City; State; Zip Code 366 Summer St  Somerville, MA 02144	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fee
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 09/15/2024	Payee name ActBlue	
Amount (\$) \$64.61	Payee address; City; State; Zip Code 366 Summer St  Somerville, MA 02144	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 09/22/2024	Payee name ActBlue	
Amount (\$) \$51.94	Payee address; City; State; Zip Code 366 Summer St  Somerville, MA 02144	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 5/5 Rpt: 43/48	<b>2</b> FILER NAME Culbert, Katherine (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00088068
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<b>4</b> Date 07/01/2024	<b>5</b> Payee name Texas Ethics Commission
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<b>6</b> Amount (\$) \$500.00	<b>7</b> Payee address; City; State; Zip Code PO Box 12070 Capitol Station Austin, TX 78711
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fee
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/11/2024	Payee name Worley Printing Co, Inc
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Amount (\$) \$1,315.24	Payee address; City; State; Zip Code 3217 North IH-35  Austin, TX 78722
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Expense
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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.

<b>1</b>	Total pages Schedule F4: Sch: 1/5 Rpt: 44/48	<b>2</b>	FILER NAME Culbert, Katherine (Ms.)	<b>3</b>	Filer ID (Ethics Commission Filers) 00088068
<b>4</b>	CREDIT CARD ISSUER	Name of financial institution Capital One		<b>5</b>	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
<b>6</b>	PAYMENT	(a) Amount Charged \$15.35	(b) Date of Charge 07/02/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name Google		(b) Payee address; City, State, Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043	
<b>8</b>	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 Software	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b>	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>6</b>	PAYMENT	(a) Amount Charged \$1,241.89	(b) Date of Charge 07/05/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name NGP Van Inc MOTO		(b) Payee address; City, State, Zip Code 655 15th St NW Suite 650 Washington, DC 20005	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		(b) Description Software	
		(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
<b>6</b>	PAYMENT	(a) Amount Charged \$14.99	(b) Date of Charge 07/26/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name iPostal1, LLC		(b) Payee address; City, State, Zip Code 400 Rella Blvd, Suite 206 Montebello, NY 10901	
<b>8</b>	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 Expense	
		(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

# 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.

<b>1</b>	Total pages Schedule F4: Sch: 2/5 Rpt: 45/48	<b>2</b>	FILER NAME Culbert, Katherine (Ms.)	<b>3</b>	Filer ID (Ethics Commission Filers) 00088068
<b>4</b>	CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b>	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
<b>6</b>	PAYMENT	(a) Amount Charged \$23.56	(b) Date of Charge 07/29/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name Wix		(b) Payee address; City, State, Zip Code 500 Terry A Francois Blvd 6th floor San Francisco, CA 94158	
<b>8</b>	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 Software	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
<b>9</b>	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>6</b>	PAYMENT	(a) Amount Charged \$15.35	(b) Date of Charge 08/02/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name Google		(b) Payee address; City, State, Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043	
<b>8</b>	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 Software	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
<b>9</b>	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>6</b>	PAYMENT	(a) Amount Charged \$1,241.89	(b) Date of Charge 08/07/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name NGP Van Inc MOTO		(b) Payee address; City, State, Zip Code 655 15th St NW Suite 650 Washington, DC 20005	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		(b) Description Software	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
<b>9</b>	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.

<b>1</b>	Total pages Schedule F4: Sch: 3/5 Rpt: 46/48	<b>2</b>	FILER NAME Culbert, Katherine (Ms.)	<b>3</b>	Filer ID (Ethics Commission Filers) 00088068
<b>4</b>	CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b>	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
<b>6</b>	PAYMENT	(a) Amount Charged \$16.00	(b) Date of Charge 08/17/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name Wells Fargo TO		(b) Payee address; City, State, Zip Code 400 West 15th St Austin, TX 78701	
<b>8</b>	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 Transportation	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b>	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>6</b>	PAYMENT	(a) Amount Charged \$14.99	(b) Date of Charge 08/26/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name iPostal1, LLC		(b) Payee address; City, State, Zip Code 400 Rella Blvd, Suite 206 Montebello, NY 10901	
<b>8</b>	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 Expense	
		(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
<b>6</b>	PAYMENT	(a) Amount Charged \$24.06	(b) Date of Charge 08/29/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name wix		(b) Payee address; City, State, Zip Code 500 Terry A Francois Blvd 6th floor San Francisco, CA 94158	
<b>8</b>	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 Software	
		(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

# 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.

<b>1</b>	Total pages Schedule F4: Sch: 4/5 Rpt: 47/48	<b>2</b>	FILER NAME Culbert, Katherine (Ms.)	<b>3</b>	Filer ID (Ethics Commission Filers) 00088068
<b>4</b>	CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b>	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
<b>6</b>	PAYMENT	(a) Amount Charged \$4,000.00	(b) Date of Charge 08/30/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name 1833 Group		(b) Payee address; City, State, Zip Code 1100 Jorie Blvd Suite 118 Oak Brook, IL 60523	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description Consulting Expense	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b>	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>6</b>	PAYMENT	(a) Amount Charged \$15.35	(b) Date of Charge 09/02/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name Google		(b) Payee address; City, State, Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043	
<b>8</b>	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 Software	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b>	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>6</b>	PAYMENT	(a) Amount Charged \$1,241.89	(b) Date of Charge 09/06/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name NGP Van Inc MOTO		(b) Payee address; City, State, Zip Code 655 15th St NW Suite 650 Washington, DC 20005	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		(b) Description Software	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b>	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.

<b>1</b> Total pages Schedule F4: Sch: 5/5 Rpt: 48/48	<b>2</b> FILER NAME Culbert, Katherine (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00088068
<b>4</b> CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
<b>6</b> PAYMENT	(a) Amount Charged \$16.00	(b) Date of Charge 09/26/2024	(c) Date(s) Credit Card Issuer Paid
<b>7</b> PAYEE	(a) Payee name Wells Fargo TO	(b) Payee address; City, State, Zip Code 400 West 15th St Austin, TX 78701	
<b>8</b> 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 Transportation
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
<b>PAYMENT</b>	(a) Amount Charged \$14.99	(b) Date of Charge 09/26/2024	(c) Date(s) Credit Card Issuer Paid
<b>PAYEE</b>	(a) Payee name iPostal1, LLC	(b) Payee address; City, State, Zip Code 400 Rella Blvd, Suite 206 Montebello, NY 10901	
<b>PURPOSE OF EXPENDITURE</b> <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 Expense
	(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