CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The	e C/OH Instruction (Guide explains how to complete	e this form.	1 Filer ID (Ethics Commis 00088377		2 Total pages f	ïled: 78
	CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE	USE ONLY
	OFFICEHOLDER NAME	1	Desiree M.				
	NAME					Date Received	
						ELECTRONIC	ALLY FILED
		NICKNAME	_AST		SUFFIX	10/28/2024	
			Venable				
4	CANDIDATE /	ADDRESS / PO BOX; APT / S	SUITE #; CIT	Y;	ZIP CODE	Date Hand-delivered	or Date Postmarked
	OFFICEHOLDER	120 Meadowood Dr.					
	MAILING ADDRESS					Receipt #	Amount
		Destrop TV 70000					
	Change of Address	Bastrop, TX 78602				Date Processed	
						Date Imaged	
	CAMPAIGN	MS / MRS / MR F	IRST		MI		
	TREASURER NAME	Mrs. S	Stacey M.				
		NICKNAME L	AST		SUFFIX		
		\ \	/enable				
6	CAMPAIGN	STREET ADDRESS (NO PO B	OX PI FASE).	ΔΡ	r / SUITE #; CITY;	ST	ATE; ZIP CODE
	TREASURER	7208 High Point Dr.	OAT LEASE),		1730HE#, 0HT,	51	ATE, ZII CODE
	ADDRESS						
	(Residence or Business)						
		Raymondville, MO 65555					
7	CAMPAIGN	AREA CODE PHONE	NUMBER E	EXTENSION			
	TREASURER		NUMBER E	EXTENSION			
	PHONE	(417) 217-2712					
-	DEDODT						
	REPORT TYPE	January 15	30th day before		Runoff	1 15th day after ca	ampaign treasurer
			Sour day before			appointment (off	ficeholder only)
		July 15 X	8th day before	election	Exceeded modified	Final Report (At	tach C/OH-FR)
		-			reporting limit	-	
	PERIOD	Month Day Year			Month Day	Year	
	COVERED	09/27/2024	TF	IROUGH	10/26/2024	1	
10	ELECTION	ELECTION DATE			ELECTION TYPE		
		Month Day Year		rimary	Runoff	Other	
		11/05/2024		eneral	Special		
11	OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT		
					State Representa	anve District 17	
L							
			GO T	O PAGE 2			
Ļ	mo provide d bes T	voo Ethioo Commississi			2	\/	Non 1/4 1 0 40-1-54 (7
⊢or	ms provided by Te	xas Ethics Commission	www.et	hics.state.tx.u	5	vers	ion V4.1.0.48da51f7

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

Venable, Desiree M.

13 C / OH NAME

Forms

FORM C/OH **COVER SHEET PG 2** 2 of 78

(Ethics Commission Filers)

14 Filer ID

		00088377	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditures made by political or These expenditures may have been made without the candidate's or offic d officeholders are required to report this information only if they receive no	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME	
	GENERAL		
		COMMITTEE ADDRESS	
	SPECIFIC		
		COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, ES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 61.24
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 25,221.14
EXPENDITURE TOTALS	3. TOTAL UNITEM	IIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITIC	CAL EXPENDITURES	\$ 29,705.63
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE ERIOD	\$ 10,564.53
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIE OF THE REPOF	PAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY RTING PERIOD	\$ 9,257.99
17 AFFIDAVIT	•		-
		I swear, or affirm, under penalty of perjury, that the ac true and correct and includes all information required under Title 15, Election Code.	
		Desiree M. Venable	
		Signature of Candidate or Officeho	lder
AFFIX NO	DTARY STAMP / SEAL AB	OVE	
Sworn to and subs	scribed before me, by the s	aid, this the	day
		ertify which, witness my hand and seal of office.	
Signature of off	ficer administering	Printed name of officer administering Title of office	r administering oath
Forms provided by Te	exas Ethics Commission	n www.ethics.state.tx.us	Version V4.1.0.48da51f7

SUBTOTALS - C/OH	FORM C/OH OVER SHEET PG 3 3 of 78	
18 FILER NAME Venable, Desiree M.	19 Filer ID 00088377	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 25,221.14
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE E: LOANS		\$
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	5	\$ 27,080.64
6. X SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 2,624.99
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$
10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	DNS	\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$

SCHEDULE	A1
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	The Instru	iction Guide explains how to complete this f	iorm.	1	Total pages Schedule A1: Sch: 1/52 Rpt: 4/78	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Venable, De	esiree M.			00088377	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	10/12/2024					\$500.00
	I	6 Contributor address; City; State; Zip Code		1		
		· ·				
		Mineral Wells, TX 76068				
8		upation / Job title (See Instructions)	9 Employer (See Instructions	3)		
	committee		Committee			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/30/2024	A Maricela Guerrero, Guerrero				\$10.00
	I	Contributor address; City; State; Zip Code		1		
		League City, TX 77573		L		
		upation / Job title (See Instructions)	Employer (See Instructions	3)		
	Not Employe	ed be	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:)	Ē	Amount of Contribution (\$)	
	09/27/2024	Abby, Manley				\$10.00
	1	Contributor address; City; State; Zip Code		1		
		Puyallup, WA 98371				
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
	X-ray techno		Nope	. 		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/01/2024	Adam, Kuta]		\$25.00
		Contributor address; City; State; Zip Code				
		Norwalk, CT 06850				
⊢	Dringinal occu	upation / Job title (See Instructions)	Employer (See Instructions	$\sum_{i=1}^{n}$		
	CIO		Bob's Discount Furniture			
╘				ਦ −		
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	<u>*10.00</u>
	09/27/2024	Allison, Welty				\$10.00
		Contributor address; City; State; Zip Code				
		Averill Park, NY 12018				
\vdash	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	\sum_{n}		
	engineering		US Army	3)		
⊢						
1						

SCHEDULE	A1
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F	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 2/52 Rpt: 5/78	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Venable, De	siree M.			00088377	
4	Date	5 Full name of contributor out-of-state PAC (ID#)	7	Amount of Contribution (\$)	
	10/06/2024	Amy, Dempsey				\$25.00
		6 Contributor address; City; State; Zip Code		1		
		Frisco, TX 75035				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Speech lang	guage pathologist	Frisco ISD			
╞	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/27/2024	Amy, Flores				\$5.00
				1		
		Clearfield, UT 84015				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Property ma	nager	Amclic			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/29/2024	Amy, Mautz				\$5.00
				1		
		Round Rock, TX 78681				
		upation / Job title (See Instructions)	Employer (See Instructions	3)		
	Not Employe	ed	Not Employed			
F	Date	Full name of contributor out-of-state PAC (ID#	······································	Γ	Amount of Contribution (\$)	
	09/27/2024	Andrea, Smith				\$25.00
		Contributor address; City; State; Zip Code		1		
		BRISTOL, TN 37620				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	3)		<u> </u>
	Instructor		self			
F	Date	Full name of contributor out-of-state PAC (ID#	······································	Γ	Amount of Contribution (\$)	
	10/06/2024	Ann, Thomas				\$100.00
		Contributor address; City; State; Zip Code		1		
		Lockhart, TX 78644				
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/52 Rpt: 6/78	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Venable, De	siree M.			00088377	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	10/01/2024	Annie, Marrs				\$5.00
		6 Contributor address; City; State; Zip Code				
		Contributor address, City, State, Zip Code				
		Bastrop, TX 78602				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u> ເ)		
ľ	Not Employe		Not Employed	"		
				_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	+
	09/28/2024	April, McCool				\$25.00
		Contributor address; City; State; Zip Code				
		Granbury, TX 76049				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Self Employe	ed	Self employed			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/28/2024	Ashley, Ferguson				\$10.00
		Contributor address; City; State; Zip Code				
		Weatherford, TX 76088-5001				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Teacher		Weatherford ISD			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/27/2024	B, Lee	/			\$50.00
		Contributor address; City; State; Zip Code				
		Jasper, IN 47546				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ເ)		
	Not Employe		Not Employed	,		
⊨				<u> </u>		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	#F0 00
	09/30/2024					\$50.00
		Contributor address; City; State; Zip Code				
		Belmont, CA 94002				
1		pation / Job title (See Instructions)	Employer (See Instructions	5)		
L	Scientist		Gilead			
Γ						
1						

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 4/52 Rpt: 7/78	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Venable, De				00088377	/
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	10/25/2024	Becky, Nichols				\$25.00
		6 Contributor address; City; State; Zip Code		1		
		Paige, TX 78659				
8		upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/13/2024	Betty, Klemme				\$200.00
		Contributor address; City; State; Zip Code		1		
		Elgin, TX 78621				
		ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired		Retired			
	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	09/27/2024	Betty, Stephens				\$10.00
		Contributor address; City; State; Zip Code		1		
		Columbia, MO 65203				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	;)		
	Not Employe	ed	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/29/2024	Beverly, Griffith				\$15.00
		Contributor address; City; State; Zip Code		1		
		Claremont, CA 91711				
	•	ipation / Job title (See Instructions)	Employer (See Instructions	;)		
	Dir of Opera	tions	SBMF			
	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	09/28/2024	Bobbie, Garcia				\$10.00
		Contributor address; City; State; Zip Code		1		
		Laguna Hills, CA 92653	i			
		pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Consultant		BG Specialty			

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this fo	1	Total pages Schedule A1: Sch: 5/52 Rpt: 8/78		
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Venable, De	siree M.			00088377	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	10/04/2024	Bobbie, Garcia				\$10.00
		6 Contributor address; City; State; Zip Code				*=
	I	Contributor address, City, State, Zip Code				
	I					
	I	Laguna Hills, CA 92653				
Ļ	Dringinal occu		9 Employer (See Instructions	<u> </u>		
°	Consultant		BG Specialty)		
	Consultant			_		
	Date Full name of contributor out-of-state PAC (ID#:)				Amount of Contribution (\$)	
	09/29/2024	Brendan, Boerner				\$100.00
	1	Contributor address; City; State; Zip Code		1		
	I					
	I	Bastrop, TX 78602				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Software De	veloper	Great Point Capital LLC			
⊨	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/30/2024	Caitlin, Froseth				\$15.00
	•••••	Contributor address; City; State; Zip Code		ł		*=
	I	Continuation address, City, State, Zip Code				
	I					
	I	Minot, ND 58701				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ו)		
	Homemaker		Caitlin Froseth	,		
╞			Caluminitiese	-		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	±100.00
	10/12/2024	Carla, Schoonover-Porter]		\$100.00
	I	Contributor address; City; State; Zip Code				
	I					
	I					
		Palo Pinto, TX 76484				
	•	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	HR		SMH			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/13/2024	Caroline, Sinclair				\$10.00
	I	Contributor address; City; State; Zip Code		ł		
	I					
	I					
	I	Del Valle, TX 78617				
\vdash	Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Not Employe		Not Employed	,		
┝		<u> </u>				

SCHEDULE	A1
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	The Instruc	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 6/52 Rpt: 9/78		
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Venable, De	siree M.			00088377	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/27/2024	Carolyn, Taylor				\$10.00
		6 Contributor address; City; State; Zip Code				
		Sandy Springs, GA 30328				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Teacher		High school			
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/27/2024	Carolyn, Taylor				\$10.00
		Contributor address; City; State; Zip Code		1		
		Sandy Springs, GA 30328				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Teacher		School			
	Date	Full name of contributor out-of-state PAC (ID#:	·)		Amount of Contribution (\$)	
	09/28/2024	Carri, Davis				\$5.00
		Contributor address; City; State; Zip Code		1		
		Arlington, TX 76013				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Quality mana	agement	Grifols			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/27/2024	Catherine, Powers-James				\$10.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77007				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Psychologist		MD Anderson			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/22/2024	Catherine, Powers-James				\$10.00
	Contributor address; City; State; Zip Code					
		Houston, TX 77007				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Psychologist		MD Anderson			

SCHEDULE	A1
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	The Instruction Guide explains how to complete this form.				1	Total pages Schedule A1: Sch: 7/52 Rpt: 10/78	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Venable, De	siree M.				00088377	,
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/30/2024	Cecilia, Vazquez					\$5.00
		6 Contributor address; City; State	; Zip Code		1		
		El Paso, TX 79938					
8	Principal occu	pation / Job title (See Instructions)	9	9 Employer (See Instructions	5)		
	Realtor			Self			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/27/2024	Celia, Merrick	-				\$50.00
		Contributor address; City; State	; Zip Code				
		Bastrop, TX 78602					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Not Employe	ed		Not Employed			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/29/2024	Charity, Kuchin	-				\$10.00
		Contributor address; City; State			1		
		Eugene, OR 97405					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	owner			self employed			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/29/2024	Charles, Benavides	-				\$10.00
		Contributor address; City; State	; Zip Code				
		Hondo, TX 78861					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Paramedic			DOD			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/27/2024	Charles, Gibson	-				\$20.00
		Contributor address; City; State	; Zip Code				
L		Fairbanks, AK 99701					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
L	Not Employe	ed		Not Employed			
Γ							
1							

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 8/52 Rpt: 11/78	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Venable, De	siree M.			00088377	
4	Date	5 Full name of contributor Out-of-state PAC (ID	#:)	7	Amount of Contribution (\$)	
	09/30/2024	Chris, Patrick				\$100.00
		6 Contributor address; City; State; Zip Code		·		
		Cameron, TX 76520				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruction:	s)		
	Not Employe	d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID	#:)	Г	Amount of Contribution (\$)	
	09/27/2024	Christian, Chandler				\$2.00
	Contributor address; City; State; Zip Code					
		RICHMOND, CA 94805				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	s)		
	Full Stack Ap	oplication Developer	TCS			
	Date	Full name of contributor out-of-state PAC (ID	#:)	Т	Amount of Contribution (\$)	
	09/27/2024	Christina, Rippen				\$10.00
		Contributor address; City; State; Zip Code		1		
		Basehor, KS 66007				
	•	pation / Job title (See Instructions)	Employer (See Instruction			
	Pricing Analy	/st	Staples Promotional Pr	odı	ucts	
	Date	Full name of contributor 🛛 out-of-state PAC (ID	#:)	Γ	Amount of Contribution (\$)	
	09/27/2024	Christopher, Dickey				\$25.00
		Contributor address; City; State; Zip Code				
	<u> </u>	san diego, CA 92109		Ĺ		
		pation / Job title (See Instructions)	Employer (See Instruction	S)		
	software		self	_		
	Date	Full name of contributor out-of-state PAC (ID	#:)		Amount of Contribution (\$)	
	09/27/2024	Cindy, Aarvig				\$10.00
	Contributor address; City; State; Zip Code					
		Austin TV 70744				
\vdash	Dringing	Austin, TX 78744				
1		pation / Job title (See Instructions)	Employer (See Instruction	S)		
L	Not Employe	;u	Not Employed			

SCHEDULE	A1
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	The Instruction Guide explains how to complete this form.				Total pages Schedule A1: Sch: 9/52 Rpt: 12/78	
2	FILER NAME			3	Filer ID (Ethics Commission	i Filers)
	Venable, De	siree M.			00088377	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/29/2024	Cindy, Pollan				\$10.00
		6 Contributor address; City; State; Zip Code		1		
		Cedar Creek, TX 78612				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	;)		
	Not Employe	ed la	Not Employed			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/29/2024	Claire, Robberson			• •	\$10.00
		Contributor address; City; State; Zip Code				-
		Austin, TX 78745				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ட</u> ந)		
	Chef		Compass/Eurest			
╞	Date	Full name of contributor Out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/30/2024	Clarissa, King	,		\$25.00	
	•••••					,
		Palm Harbor, FL 34685				
\vdash	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ட</u> ந)		
	Not Employe		Not Employed			
⊨	Date	Full name of contributor Out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/09/2024	Connie, Miller	, Ì			\$100.00
	10/00/202	Contributor address; City; State; Zip Code				Ψ±00.05
		Continuation address, City, State, Zip Code				
		Lubbock, TX 79424				
\vdash	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> چ)		
	Homemaker		Self	,		
⊨	Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u>	Γ	Amount of Contribution (\$)	
	09/28/2024	Craig, Mason	/		/ mount of contraction (+,	\$25.00
	00,20,212	Contributor address; City; State; Zip Code				*==
		League City, TX 77573				
⊢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> چ)		
	Training Cod		Marathon Petroleum	,		
\vdash			<u> </u>			

	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 10/52 Rpt: 13/78	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Venable, De	siree M.			00088377	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	10/22/2024	Cynthia, Berger				\$20.00
		6 Contributor address; City; State; Zip Code		1		
Ļ		Bastrop, TX 78602				
8		pation / Job title (See Instructions)	9 Employer (See Instructions)	5)		
	Not Employe		Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/27/2024	Damien, Shulock				\$25.00
		Contributor address; City; State; Zip Code]		
	D 1	San Francisco, CA 94107		Ĺ		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Engineer	·	ZKR Orthopedics	-		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/27/2024					\$30.00
		Contributor address; City; State; Zip Code				
		Sparks, NV 89434				
_	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	teacher		Avenues World School	<i>,</i>		
╞		Full name of contributor Out-of-state PAC (ID#:			Amount of Contribution (\$)	
	Date 09/27/2024	Full name of contributor out-of-state PAC (ID#: Daniel, Galindo)		Amount of Contribution (\$)	\$25.00
	09/21/2024					φ25.00
		Contributor address; City; State; Zip Code				
		Longview, TX 75602				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	1 5)		
	Nurse		Havencare			
⊨	Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Γ	Amount of Contribution (\$)	
	09/27/2024	Danielle, Lewandowski	/		Amount of Contribution (+,	\$10.00
	00,2	Contributor address; City; State; Zip Code		-		-
		ELKTON, MD 21921				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe		Not Employed			
\vdash						

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 11/52 Rpt: 14/78	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
[Venable, De	siree M.			00088377	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/28/2024	Dannielle, Bush				\$10.00
		6 Contributor address; City; State; Zip Code		1		
		Pflugerville, TX 78660				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Sub		Pfisd			
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/28/2024 Darlene, James				\$10.00	
	Contributor address; City; State; Zip Code					
		Jamaica, NY 11436				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Registered d	lental hygienist	Nbdc			
	Date	—)		Amount of Contribution (\$)	
	10/06/2024	Darlene, James				\$10.00
		Contributor address; City; State; Zip Code				
	<u> </u>	Jamaica, NY 11436		Ĺ		
		pation / Job title (See Instructions)	Employer (See Instructions Nbdc	5)		
	Registered u	lental hygienist		_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/27/2024	David, Tarvin				\$25.00
		Contributor address; City; State; Zip Code				
		F 04 00705				
	Duin aire al la ann	Fresno, CA 93705	Frankriger (Os a la structiona			
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Tax Analyst		HdL Companies	_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/08/2024	David, Ware				\$25.00
	Contributor address; City; State; Zip Code					
		Canto Dominaro TV 10014				
⊢	Duin cha ch	Santo Domingo, TX 10014				
l		pation / Job title (See Instructions)	Employer (See Instructions	5)		
⊢	Retired		self employees			

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	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 12/52 Rpt: 15/78	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
-	Venable, De	siree M.			00088377	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/13/2024	Deborah, Elliott				\$25.00
	1	6 Contributor address; City; State; Zip Code		1		
		Giddings, TX 78942				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	RN		Hospital			
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/27/2024	Debra, Lucke				\$10.00
		Contributor address; City; State; Zip Code		ł		
		Burnsville, MN 55337				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			
⊨	Date	Full name of contributor Out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	09/27/2024	Debra, Wiggins	/			\$10.00
	00/21/202	Contributor address; City; State; Zip Code		\mathbf{I}		Ψ±0.03
		Continuation address, City, State, Zip Code				
		Ocean Gate, NJ 08740				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ג)		
	Not Employe		Not Employed	,		
╞				.	tt -f Opertribution (ft)	
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	<u> </u>
	09/27/2024	Diane, torres				\$20.24
		Contributor address; City; State; Zip Code				
		Burlingomo CA 04010				
\vdash	Dringingl oppu	Burlingame, CA 94010		<u> </u>		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe		Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/27/2024	Dorothy, Moller				\$25.00
		Contributor address; City; State; Zip Code]		
		Austin, TX 22207				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Consultant		DMoller and Associates			

The Ins	truction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 13/52 Rpt: 16/78
2 FILER NA	ME		3 Filer ID (Ethics Commission Filers)
Venable	Desiree M.		00088377
4 Date 09/28/20	5 Full name of contributor Out-of-state PAC (ID# Dotty, Freeman	t:)	7 Amount of Contribution (\$)\$25.00
	6 Contributor address; City; State; Zip Code		
	Troy, TX 76579		
	occupation / Job title (See Instructions)	9 Employer (See Instructions	\$)
Not Emp	loyed	Not Employed	
Date	Full name of contributor out-of-state PAC (ID#	:)	Amount of Contribution (\$)
09/27/20			\$100.00
	Contributor address; City; State; Zip Code		
	Pflugerville, TX 78660		
Principal	occupation / Job title (See Instructions)	Employer (See Instructions	s)
Consulta	nt	MIH Holdings	
Date	Full name of contributor out-of-state PAC (ID#	±)	Amount of Contribution (\$)
09/27/20	24 Edward, Dougherty		\$10.00
	Contributor address; City; State; Zip Code		
	Saugerties, NY 12477		
	occupation / Job title (See Instructions)	Employer (See Instructions	\$)
Not Emp	loyed	Not Employed	
Date	Full name of contributor out-of-state PAC (ID#	t:)	Amount of Contribution (\$)
09/28/20			\$25.00
	Contributor address; City; State; Zip Code		
	Crowley, TX 76036		
Principal	pecupation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
Attorney		Consilio Services LLC	<i>''</i>
	Full name of contributor Out-of-state PAC (ID#		Amount of Contribution (\$)
Date 10/21/20		f:)	Amount of Contribution (\$) \$25.00
			ψ20.00
	Contributor address; City; State; Zip Code		
	Auburn, AL 36830		
Principal	occupation / Job title (See Instructions)	Employer (See Instructions	
Real esta		Three Sixty	<i>''</i>

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 14/52 Rpt: 17/78	
2 FILER NAME			3 Filer ID (Ethics Commission File	ers)
Venable, De	siree M.		00088377	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
10/04/2024	Elizabeth, Hooper		\$	\$25.00
	6 Contributor address; City; State; Zip Code			
2 Dringing ago	Sherman Oaks, CA 91401		、 、	
8 Principal occu Publisher	pation / Job title (See Instructions)	9 Employer (See Instructions) Self)	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
10/18/2024			\$	\$25.00
	Contributor address; City; State; Zip Code			
	Oceanside, CA 92054			
Princinal occu	pation / Job title (See Instructions)	Employer (See Instructions))	
Customer se		Wine.com)	
			Amount of Contribution (\$)	
Date 09/27/2024	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	\$10.00
0912112024	Elizabeth, Jauregui		Ψ.	\$10.00
	Contributor address; City; State; Zip Code			
	Austin, TX 78734			
Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions))	
IT Director		EEA Consulting Enginee	ers	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
10/01/2024	Elizabeth M, Wysocki			\$50.00
	Contributor address; City; State; Zip Code			
	Bastrop, TX 78602			
	pation / Job title (See Instructions)	Employer (See Instructions))	
Not Employe	ed	Not Employed		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/27/2024	Elliott, Manferd		\$	\$20.00
	Contributor address; City; State; Zip Code			
	Luling, TX 78648			
-	pation / Job title (See Instructions)	Employer (See Instructions))	
Disabled		Disabled		

The Instrue	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 15/52 Rpt: 18/78
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Venable, De	siree M.		00088377
4 Date	5 Full name of contributor out-of-state PAC (ID#:	:)	7 Amount of Contribution (\$)
09/27/2024	Elvis, Isaac		\$10.00
	6 Contributor address; City; State; Zip Code		
	crosby, TX 77532		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>
GE Proj Mgr		GE	<i>,</i>
Date	Full name of contributor out-of-state PAC (ID#:	t:)	Amount of Contribution (\$)
09/28/2024	Enrique, Rodriguez	/	\$40.00
	Contributor address; City; State; Zip Code		
	Lockhart, TX 78644		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	\$)
Not Employe	¢d	Not Employed	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/30/2024	Eric, Carlson		\$25.00
	Contributor address; City; State; Zip Code		
	Pflugerville, TX 78660		
-	pation / Job title (See Instructions)	Employer (See Instructions	3)
Software Ana	alyst	Bentley Systems Inc.	
Date	Full name of contributor out-of-state PAC (ID#:	:)	Amount of Contribution (\$)
10/22/2024	Eric, Maples		\$25.00
	Contributor address; City; State; Zip Code		1
	Chicago II 60625		
Dringing occu	Chicago, IL 60625 pation / Job title (See Instructions)	Employer (See Instructions	
Barista		City Coffee	;)
Date	Full name of contributor out-of-state PAC (ID#:	:)	Amount of Contribution (\$)
10/02/2024	Eric, Morales		\$10.00
	Contributor address; City; State; Zip Code		
	San Diego, CA 92120		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
Photographe		Eric Morales	·/
<u> </u>	<u>.</u>		

	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 16/52 Rpt: 19/78	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Venable, De	siree M.			00088377	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/06/2024	Ericka, Novinson				\$5.00
		6 Contributor address; City; State; Zip Code		1		
Ļ	Drizoinal agou	Mesa, AZ 85215	Contructions	<u> </u>		
8	Principal occu Regional ma	pation / Job title (See Instructions)	9 Employer (See Instructions Nordstr	5)		
╘	_			1		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$100.00
	10/02/2024	Frank, Estrada				\$100.00
	Contributor address; City; State; Zip Code					
		Lockhart, TX 78644				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ג)		
	Not Employe		Not Employed	,		
╞	Date	Full name of contributor out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	09/30/2024	Frederick, Cherny	·/			\$34.00
	00,00,202	Contributor address; City; State; Zip Code		$\left \right $		40
		Austin, TX 78744				
	-	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	:d	Not Employed			
F	Date	Full name of contributor out-of-state PAC (ID#:	·)	Ī	Amount of Contribution (\$)	
	09/27/2024	Gerardo, Fernandez				\$50.00
		Contributor address; City; State; Zip Code		1		
	Drivel easy	Huntington Park, CA 90255		Ĺ		
	Principal occu Accountant	pation / Job title (See Instructions)	Employer (See Instructions Pacific Lighting And Sta		arda	
L				T		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	<u>محم مم</u>
	09/27/2024	Gil, Zilberstein				\$56.00
		Contributor address; City; State; Zip Code				
		San Francisco, CA 94132				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Not Employe		Not Employed	,		
⊢						

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 17/52 Rpt: 20/78 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Venable, Desiree M. 00088377 Date 4 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 09/29/2024 Gina, OHara \$250.00 6 Contributor address; City; State; Zip Code Cedar Creek, TX 78612 Principal occupation / Job title (See Instructions) 8 9 Employer (See Instructions) Insurance Anco Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 10/09/2024 \$10.00 Glynn, Graham Contributor address; City; State; Zip Code Cedar Creek, TX 78612 Principal occupation / Job title (See Instructions) Employer (See Instructions) campground manager self Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 09/29/2024 \$5.00 Grace, Drake Contributor address; City; State; Zip Code Lubbock, TX 79407 Principal occupation / Job title (See Instructions) Employer (See Instructions) Lubbock ISD Teacher Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 09/27/2024 \$25.00 Grace, Garcia Contributor address; City; State; Zip Code Austin, TX 78759 Principal occupation / Job title (See Instructions) Employer (See Instructions) Paralegal Law Office Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 09/28/2024 \$25.00 Greg, Dean Contributor address; City; State; Zip Code Redmond, WA 98053 Principal occupation / Job title (See Instructions) Employer (See Instructions) Engineering Mgr Tableau

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 18/52 Rpt: 21/78	
2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
	Venable, De				00088377	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/27/2024	Gregory, Bowman				\$3.00
		6 Contributor address; City; State; Zip Code		1		
	ļ					
		Sonoma, CA 95476				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	;)		
	Not employe	.d	Not employed			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/28/2024 Hannah, Wilson				\$10.00	
	Contributor address; City; State; Zip Code			1		
	ļ	Fort Worth, TX 76116				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Technical wr	iter	Exeter			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/27/2024	Heather, Erwin				\$10.00
		Contributor address; City; State; Zip Code		•		
	ļ					
	ļ	San Diego, CA 92115				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Program ma	nager	UC San Diego Health			
F	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	09/27/2024	Heather, Heiting				\$10.00
	ļ	Contributor address; City; State; Zip Code		•		
		Richardson, TX 75080				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
	Buyer		Siemens			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/02/2024	Henry, Torres				\$10.00
		Contributor address; City; State; Zip Code		ł		
	ļ					
	ļ	Dallas, TX 75240				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
	Not Employe	ed .	Not Employed			
\vdash			<u> </u>			

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 19/52 Rpt: 22/78		
2	FILER NAME			3	Filer ID (Ethics Commission	1 Filers)
	Venable, De				00088377	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/27/2024	Jackie, Charley	ļ			\$10.00
		6 Contributor address; City; State; Zip Code				
			ļ			
			ļ			
		Allen, TX 75002				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	;)		
	Not Employe	эd	Not Employed			
F	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	09/27/2024	Jackie, Charley				\$10.00
		Allen, TX 75002				
\vdash	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)		
	Not Employe	ed	Not Employed			
F	Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Γ	Amount of Contribution (\$)	
	09/28/2024	Jairo, Hernandez				\$10.00
		Contributor address; City; State; Zip Code				
			ļ			
			ļ			
		Abilene, TX 79602	ļ			
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)		
	Not Employe	ed	Not Employed			
⊨	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	09/30/2024	Jared, McAllister				\$5.00
		Contributor address; City; State; Zip Code				
			ļ			
		Houston, TX 77018				
\vdash	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
	Manager	· · · · · · · · · · · · · · · · · · ·	CVX			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/05/2024	Jason, Brodsky				\$10.00
		Contributor address; City; State; Zip Code				
		Rio Rancho, NM 87144				
\vdash	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
	Medical Billir		Christus St Vincent Hos		al	
\vdash				<u> </u>		

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 20/52 Rpt: 23/78 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Venable, Desiree M. 00088377 Date 4 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 10/02/2024 Jason, Rivas \$10.00 6 Contributor address; City; State; Zip Code San Marcos, TX 78666 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) 8 **Project Planner** TxDOT Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 10/05/2024 \$10.00 Javier, Hernandez Contributor address; City; State; Zip Code Houston, TX 77019 Principal occupation / Job title (See Instructions) Employer (See Instructions) Banker Chase Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 09/28/2024 Jeanette, Murrell \$25.00 Contributor address; City; State; Zip Code Cypress, TX 77433 Principal occupation / Job title (See Instructions) Employer (See Instructions) Systems Analyst **Buckeye Partners** Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 09/27/2024 \$50.00 Jeanette, Tzyen Contributor address; City; State; Zip Code Portland, OR 97232 Principal occupation / Job title (See Instructions) Employer (See Instructions) Office Providence Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 09/30/2024 \$10.00 Jennifer, Pease Contributor address; City; State; Zip Code EUGENE, OR 97404 Principal occupation / Job title (See Instructions) Employer (See Instructions) Artist Self

	The Instru	ction Guide explains how to complete this	s form.		Fotal pages Schedule A1: Sch: 21/52 Rpt: 24/78	
2	FILER NAME			3 F	Filer ID (Ethics Commission	n Filers)
	Venable, De	siree M			00088377	
4	Date	5 Full name of contributor Out-of-state PAC (ID#	#:)	7 /	Amount of Contribution (\$)	
	09/29/2024	Jenny, Hutchinson				\$15.00
	I	6 Contributor address; City; State; Zip Code		1		
		Detroit, MI 48235				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Not Employe	ed et al.	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#	#:)	<i>A</i>	Amount of Contribution (\$)	
	09/27/2024	Jeremy, Labbe				\$5.00
	I	Contributor address; City; State; Zip Code		1		
		Pensacola, FL 32514				
		ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	Retail Assoc	1	Publix Supermarkets			
	Date	Full name of contributor out-of-state PAC (ID#	#:)	^	Amount of Contribution (\$)	
	10/07/2024					\$40.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78704				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Not Employe	¢d	Not Employed			
F	Date	Full name of contributor out-of-state PAC (ID#	#:)	4	Amount of Contribution (\$)	
	09/27/2024	JoAnn, Seymour				\$10.00
	I	Contributor address; City; State; Zip Code		1		
		Roanoke, VA 24014				
		ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	Owner		Fidelity Notary	-		
	Date	Full name of contributor out-of-state PAC (ID#	#:)	A	Amount of Contribution (\$)	
	09/27/2024	Joan, Atchley				\$20.00
		Contributor address; City; State; Zip Code				
		Cedar Creek, TX 78612				
┝	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>د)</u>		
	Not Employe		Not Employed	3)		
┝						

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 22/52 Rpt: 25/78	_
2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
	Venable, De	siree M.			00088377	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/01/2024	Joe, Sexton				\$10.00
		6 Contributor address; City; State; Zip Code		1		
		Fort Worth, TX 76177				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	 5)		
	Not Employe	d	Not Employed			
⊨	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/27/2024	Joel, Styron)			\$20.00
	03/21/2024	-				Ψ20.00
		Contributor address; City; State; Zip Code				
		Eden, NC 27288				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>լ</u> ։)		
	Technician		Wolfspeed	,		
⊨		Full name of contributor out-of-state PAC (ID#:		<u> </u>	Amount of Contribution (¢)	
	Date 09/30/2024)		Amount of Contribution (\$)	\$10.00
	09/30/2024					\$10.00
		Contributor address; City; State; Zip Code				
		King Of Prussia, PA 19406				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ເ)		
	Acme		Clerk	,		
⊨		Full name of contributor Out-of-state PAC (ID#:			Amount of Contribution (¢)	
	Date 10/03/2024)		Amount of Contribution (\$)	\$10.00
	10/03/2024	John, Ornelas				ΦT0.00
		Contributor address; City; State; Zip Code				
		Rochester, NY 14615				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Not Employe		Not Employed)		
╘						
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	*•••••••••••••
	09/27/2024					\$25.00
		Contributor address; City; State; Zip Code				
⊢	<u> </u>	Wolfville NS B4P2R1 Canada		Ĺ		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	software		self			
L						

	The Instru	ction Guide explains how to complete this f	iorm.	1	Total pages Schedule A1: Sch: 23/52 Rpt: 26/78	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
	Venable, De	siree M.			00088377	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	10/01/2024	John, Read				\$25.00
	ł	6 Contributor address; City; State; Zip Code		1		
	ļ					
		Wolfville NS B4P2R1 Canada				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	software		self			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/05/2024	John, Read				\$10.00
	Contributor address; City; State; Zip Code			1		
		Wolfville NS B4P2R1 Canada				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	software		self			
⊨	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	10/17/2024	John, Read				\$25.00
	ļ			\mathbf{I}		
	ļ					
		Wolfville NS B4P2R1 Canada				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	software		self			
⊨	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/27/2024	John, Torstrick			• •	\$25.00
	-	Contributor address; City; State; Zip Code		\mathbf{I}		
		San Antonio, TX 78209				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Statistician		Self			
⊨	Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u>	Γ	Amount of Contribution (\$)	
	09/27/2024	Jola, Morris				\$5.00
	ļ	Contributor address; City; State; Zip Code		1		
		Chugiak, AK 99567				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	eligibility tech	hnician II	state of alaska dhss			
⊢						

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 24/52 Rpt: 27/78	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Venable, De	siree M.			00088377	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	09/27/2024	Joseph, Carmel	/			\$25.00
		6 Contributor address; City; State; Zip Code				
		Contributor address, City, State, Zip Code				
		Columbia, MD 21044				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	1 5)		
	not employe		none			
⊨				<u> </u>	Amount of Constribution (ft)	
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	¢50.00
	09/27/2024	Josh, Francek				\$50.00
		Contributor address; City; State; Zip Code				
		Harrison Township, MI 48045				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Mechanic		Ford			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/15/2024	Joshua, Tutt				\$100.00
		Contributor address; City; State; Zip Code		1		
		Snook, TX 77878				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Student		Texas A&M University			
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/29/2024	Joslyn, Campbell				\$100.00
		Contributor address; City; State; Zip Code				
		· · · · · · · · · · · · · · · · · · ·				
		Houston, TX 77021				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>і</u> 5)		
	Physician		Self			
⊨	Date	Full name of contributor out-of-state PAC (ID#:)	Г	Amount of Contribution (\$)	
	10/03/2024	Juan, Martinez)			\$50.00
	10/00/2024					φ30.00
		Contributor address; City; State; Zip Code				
		Plano, TX 75074				
⊢	Drincipal occu		Employer (Soo Instructions	<u> </u>		
I	Senior Game	pation / Job title (See Instructions)	Employer (See Instructions Discord Inc	"		
\vdash	Senior Gallie					
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	The Instru	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 25/52 Rpt: 28/78	
2	FILER NAME			3	Filer ID (Ethics Commission	ו Filers)
	Venable, De	siree M.			00088377	-
4	Date	5 Full name of contributor out-of-state PAC (ID;	#:)	7	Amount of Contribution (\$)	
	09/27/2024	Julia, New				\$25.00
		6 Contributor address; City; State; Zip Code		1		
		Wimberley, TX 78676				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u> s)		
	Social work a		GSMYC Inc.	,		
	Date	Full name of contributor Out-of-state PAC (ID;	#:)	Π	Amount of Contribution (\$)	
	10/25/2024	Julie, Hottenstein			· · · · · ·	\$25.00
				1		
		Six Lakes, MI 48886	<u>.</u>			
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Not Employe	.'d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID;	#:)	T	Amount of Contribution (\$)	
	09/27/2024	Julie, Seeling]		\$25.00
		Contributor address; City; State; Zip Code				
		Terre Haute, IN 47803				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Insurance ag		Julie Seeling	-,		
	Date	Full name of contributor Out-of-state PAC (ID;		Τ	Amount of Contribution (\$)	
	09/27/2024	Justin, Mabry	···		, anoun of contraction (\$10.00
		Contributor address; City; State; Zip Code		1		·
		New York, NY 10019				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Pharmacist		Mount Sinai Hospital			
	Date	Full name of contributor out-of-state PAC (ID;	#:)	Γ	Amount of Contribution (\$)	
	09/29/2024	Katherine, Baldwin				\$10.00
		Contributor address; City; State; Zip Code				
		Escondido, CA 92026				
_	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Not Employe		Not Employed	5)		

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 Total pages Schedule A1: 1 The Instruction Guide explains how to complete this form. Sch: 26/52 Rpt: 29/78 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Venable, Desiree M. 00088377 Date 4 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 10/09/2024 Katherine, Mason 6 Contributor address; City; State; Zip Code East Palo Alto, CA 94070-2399 Principal occupation / Job title (See Instructions) 8 9 Employer (See Instructions) Software Engineer Google Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 09/29/2024 Kathryn, Kohl Contributor address; City; State; Zip Code Salem, OR 97317 Principal occupation / Job title (See Instructions) Employer (See Instructions) Assembly/Manufacturing Garmin Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 09/27/2024 Kathy, Tudor Contributor address; City; State; Zip Code Yankton, SD 57078 Principal occupation / Job title (See Instructions) Employer (See Instructions) not employed none Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 09/27/2024 Katie, Eilers Contributor address; City; State; Zip Code Gig Harbor, WA 98335 Principal occupation / Job title (See Instructions) Employer (See Instructions) Nurse Doh Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 10/10/2024 Kay, Shearer Contributor address; City; State; Zip Code Pattison, TX 77466 Principal occupation / Job title (See Instructions) Employer (See Instructions) Paraprofessional Katy ISD

\$500.00

\$15.00

\$25.00

\$10.00

\$200.00

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: Sch: 27/52 Schedule A1: Sch					
Venable, Desiree M. 00088377 4 Date 5 Full name of contributor	The Instru	ction Guide explains how to complete this f	orm.		
Venable, Desiree M. 00088377 4 Date 09/27/2024 5 Full name of contributor	2 FILER NAME			3 Filer ID (Ethics Commission File	rs)
09/27/2024 Kerrick, Johnson S50.00 6 Contributor address; City; State; Zip Code Security 0 Principal occupation / Job title (See Instructions) Principal occupation / Job title (See Instructions) Date Full name of contributor out-of-state PAC (ID#	Venable, De	esiree M.			
6 Contributor address; City: State; Zip Code Dorchester, MA 02121 Dorchester, MA 02121 8 Principal occupation / Job tille (See Instructions) Northeast Security Date Full name of contributor out-of-state PAC (toe:) 10/16/2024 Kimberly McGee, Kimberly McGee	4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
6 Contributor address; City; State; Zip Code Dorchester, MA 02121 Principal occupation / Job title (See Instructions) Security Pate 10/16/2024 Full name of contributor	09/27/2024			\$!	50.00
8 Principal occupation / Job title (See Instructions) Security 9 Employer (See Instructions) Northeast Security Date 10/16/2024 Full name of contributor out-of-state PAC (ID:::) Kimberly McGee, Kimberly McGee Amount of Contribution (\$) \$5.00 Contributor address; City; State; Zip Code					
8 Principal occupation / Job title (See Instructions) Security 9 Employer (See Instructions) Northeast Security Date 10/16/2024 Full name of contributor out-of-state PAC (ID:::) Kimberly McGee, Kimberly McGee Amount of Contribution (\$) \$5.00 Contributor address; City; State; Zip Code					
8 Principal occupation / Job title (See Instructions) Security 9 Employer (See Instructions) Northeast Security Date 10/16/2024 Full name of contributor out-of-state PAC (ID:::) Kimberly McGee, Kimberly McGee Amount of Contribution (\$) \$5.00 Contributor address; City; State; Zip Code					
Security Northeast Security Date 10/16/2024 Full name of contributorout-of-state PAC (ID#;					
Date Full name of contributor out-of-state PAC (IDE: Amount of Contribution (\$) 10/16/2024 Kimberly McGee, Kimberly McGee \$5.00 Contributor address; City; State; Zip Code Carksville, TN 37042 S5.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) WS Army Date Full name of contributor out-of-state PAC (IDE: Amount of Contribution (\$) 09/30/2024 Lara, Strong S3.00 Contributor address; City; State; Zip Code Amount of Contribution (\$) Salem, OR 97306 Employer (See Instructions) Not Employed Full name of contributor out-of-state PAC (IDE: 09/27/2024 Full name of contributor out-of-state PAC (IDE: Amount of Contribution (\$) 09/27/2024 Full name of contributor out-of-state PAC (IDE: Amount of Contribution (\$) 09/27/2024 Full name of contributor out-of-state PAC (IDE: Amount of Contribution (\$) 09/27/2024 Full name of contributor out-of-state PAC (IDE: Amount of Contribution (\$) 09/27/2024 Full name of contributor out-of-state PAC (IDE: Amount of Contribution (\$) 09/27/2024 Full name of cont		pation / Job title (See Instructions)		;)	
10/16/2024 Kimberly McGee, Kimberly McGee \$5.00 Contributor address; City; State; Zip Code Contributor address; City; State; Zip Code \$5.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) With the second seco	Security		Northeast Security		
Contributor address; City; State; Zip Code Clarksville, TN 37042 Principal occupation / Job title (See Instructions) Accounting Date 09/30/2024 Lara, Strong Salem, OR 97306 Principal occupation / Job title (See Instructions) Salem, OR 97306 Principal occupation / Job title (See Instructions) Not Employed Date Full name of contributor)		
Contributor address; City; State; Zip Code Clarksville, TN 37042 Principal occupation / Job title (See Instructions) Employer (See Instructions) Accounting US Army Date Full name of contributor out-of-state PAC (D#:) Amount of Contribution (\$) Salem, OR 97306 Amount of Contributions) Principal occupation / Job title (See Instructions) Employer (See Instructions) \$3.00 Not Employed Salem, OR 97306 Employer (See Instructions) \$3.00 Principal occupation / Job title (See Instructions) Not Employed Amount of Contribution (\$) 09/27/2024 Full name of contributor out-of-state PAC (ID#:	10/16/2024			5	\$5.00
Principal occupation / Job title (See Instructions) Accounting Employer (See Instructions) US Army Date Full name of contributor out-of-state PAC (ID#:					
Principal occupation / Job title (See Instructions) Accounting Employer (See Instructions) US Army Date Full name of contributor out-of-state PAC (ID#:					
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Accounting US Army Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/30/2024 Lara, Strong \$3.00 Contributor address; City; State; Zip Code Full name of contributor address; City; State; Zip Code Amount of Contributor (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Not Employed Full name of contributor out-of-state PAC (ID#:			<u> </u>	-	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/30/2024 Lara, Strong \$3.00 Contributor address; City, State; Zip Code \$3.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Full name of contributor out-of-state PAC (ID#:		ipation / Job title (See Instructions)		i)	
09/30/2024 Lara, Strong \$3.00 Contributor address; City; State; Zip Code \$3.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Not Employed Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Employer (See Instructions) Not Employed Amount of Contribution (\$) 09/27/2024 Fayetteville, AR 72703 Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Not Employed Date Full name of contributor Og/27/2024 Laura, Street Vincipal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Not Employed Date Full name of contributor out-of-state PAC (ID#:	Accounting		US Army		
Contributor address; City; State; Zip Code Salem, OR 97306 Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Date Full name of contributor out-of-state PAC (D#:) Laura, Street Amount of Contribution (\$) 09/27/2024 Fayetteville, AR 72703 Employer (See Instructions) Not Employed Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Date Full name of contributorout-of-state PAC (D#:) Not Employed Amount of Contribution (\$) Date Full name of contributorout-of-state PAC (D#:) Not Employed Amount of Contribution (\$) Date Full name of contributorout-of-state PAC (D#:) Laura Frances, Zelenka Amount of Contribution (\$) 09/27/2024 Laura Frances, Zelenka \$10.00 Contributor address; City; State; Zip Code Amount of Contribution (\$) Laredo, TX 78041 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions))		
Contributor address; City; State; Zip Code Salem, OR 97306 Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Full name of contributor out-of-state PAC (ID#:) O9/27/2024 Fayetteville, AR 72703 Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Amount of Contribution (\$) S25.00 Fayetteville, AR 72703 Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Not Employed Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$10.00 Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$10.00 O9/27/2024 Full name of contributor) Laura Frances, Zelenka Contributor address; City; State; Zip Code Laredo, TX 78041 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions)	09/30/2024				\$3.00
Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Date Full name of contributor out-of-state PAC (ID#:) Laura, Street Amount of Contribution (\$) \$25.00 09/27/2024 Laura, Street \$25.00 Contributor address; City; State; Zip Code Fayetteville, AR 72703 Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Date Full name of contributor out-of-state PAC (ID#:) Laura Frances, Zelenka Amount of Contribution (\$) \$10.00 09/27/2024 Full name of contributor out-of-state PAC (ID#:) Laura frances; City; State; Zip Code Amount of Contribution (\$) Lauredo, TX 78041 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$10.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$10.00					
Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Date Full name of contributor out-of-state PAC (ID#:) Laura, Street Amount of Contribution (\$) \$25.00 09/27/2024 Laura, Street \$25.00 Contributor address; City; State; Zip Code Fayetteville, AR 72703 Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Date Full name of contributor out-of-state PAC (ID#:) Laura Frances, Zelenka Amount of Contribution (\$) \$10.00 09/27/2024 Full name of contributor out-of-state PAC (ID#:) Laura frances; City; State; Zip Code Amount of Contribution (\$) Lauredo, TX 78041 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$10.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$10.00					
Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Date Full name of contributor out-of-state PAC (ID#:) Laura, Street Amount of Contribution (\$) \$25.00 09/27/2024 Laura, Street \$25.00 Contributor address; City; State; Zip Code Fayetteville, AR 72703 Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Date Full name of contributor out-of-state PAC (ID#:) Laura Frances, Zelenka Amount of Contribution (\$) \$10.00 09/27/2024 Full name of contributor out-of-state PAC (ID#:) Laura frances; City; State; Zip Code Amount of Contribution (\$) Lauredo, TX 78041 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$10.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$10.00		Solom OD 07206			
Not Employed Not Employed Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/27/2024 Laura, Street \$25.00 Contributor address; City; State; Zip Code Fayetteville, AR 72703 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/27/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/27/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/27/2024 Laura Frances, Zelenka	Dringing oog				
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/27/2024 Laura, Street \$25.00 Contributor address; City; State; Zip Code Fayetteville, AR 72703 \$25.00 Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Laura Frances, Zelenka Amount of Contribution (\$) 09/27/2024 Laura Frances, Zelenka \$10.00 Contributor address; City; State; Zip Code \$10.00 Laredo, TX 78041 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions)				<i>i)</i>	
09/27/2024 Laura, Street \$25.00 Contributor address; City; State; Zip Code \$25.00 Fayetteville, AR 72703 Employer (See Instructions) Not Employed Employer (See Instructions) Not Employed Full name of contributor 09/27/2024 Laura Frances, Zelenka Contributor address; City; State; Zip Code Amount of Contribution (\$) Laredo, TX 78041 Laredo, TX 78041					
Contributor address; City; State; Zip Code Fayetteville, AR 72703 Principal occupation / Job title (See Instructions) Not Employed Date Full name of contributor out-of-state PAC (ID#:) Laura Frances, Zelenka 09/27/2024 Full name of contributor out-of-state PAC (ID#:) Laura Frances, Zelenka Contributor address; City; State; Zip Code Amount of Contribution (\$) Laredo, TX 78041 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions))	.,	
Fayetteville, AR 72703 Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Date Full name of contributor out-of-state PAC (ID#:) Laura Frances, Zelenka Amount of Contribution (\$) Laura Frances, Zelenka 09/27/2024 Contributor address; City; State; Zip Code \$10.00 Laredo, TX 78041 Employer (See Instructions) \$10.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$10.00	09/27/2024			φ.	25.00
Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Date Full name of contributor out-of-state PAC (ID#:) Laura Frances, Zelenka Amount of Contribution (\$) (\$) 09/27/2024 Laura Frances, Zelenka \$10.00 Contributor address; City; State; Zip Code Laredo, TX 78041 Principal occupation / Job title (See Instructions) Employer (See Instructions)		Contributor address; City; State; Zip Code			
Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Date Full name of contributor out-of-state PAC (ID#:) Laura Frances, Zelenka Amount of Contribution (\$) (\$) 09/27/2024 Laura Frances, Zelenka \$10.00 Contributor address; City; State; Zip Code Laredo, TX 78041 Principal occupation / Job title (See Instructions) Employer (See Instructions)					
Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Date Full name of contributor out-of-state PAC (ID#:) Laura Frances, Zelenka Amount of Contribution (\$) (\$) 09/27/2024 Laura Frances, Zelenka \$10.00 Contributor address; City; State; Zip Code Laredo, TX 78041 Principal occupation / Job title (See Instructions) Employer (See Instructions)		Favetteville AR 72703			
Not Employed Not Employed Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/27/2024 Laura Frances, Zelenka \$10.00 Contributor address; City; State; Zip Code Laredo, TX 78041 Full name of contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions)	Principal occu	· ·	Employer (See Instructions	() ()	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/27/2024 Laura Frances, Zelenka \$10.00 Contributor address; City; State; Zip Code \$10.00 Laredo, TX 78041 Employer (See Instructions)				7	
09/27/2024 Laura Frances, Zelenka \$10.00 Contributor address; City; State; Zip Code Laredo, TX 78041 Principal occupation / Job title (See Instructions) Employer (See Instructions)				Amount of Contribution (\$)	
Contributor address; City; State; Zip Code Laredo, TX 78041 Principal occupation / Job title (See Instructions) Employer (See Instructions))	.,	10 00
Laredo, TX 78041 Principal occupation / Job title (See Instructions) Employer (See Instructions)	UJILIILULY			Ψ.	10.00
Principal occupation / Job title (See Instructions) Employer (See Instructions)					
Principal occupation / Job title (See Instructions) Employer (See Instructions)					
Principal occupation / Job title (See Instructions) Employer (See Instructions)		Laredo, TX 78041			
	Principal occu		Employer (See Instructions	<u> </u> ;)	
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MONETARY POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form.

	The Instrue	cti	on Guide explains how to complete this t	for	m.	1	Total pages Schedule A1: Sch: 28/52 Rpt: 31/78	
2	FILER NAME					3	Filer ID (Ethics Commission F	ilers)
	Venable, De	sir	ee M.				00088377	
4	Date	5	Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/27/2024		Lawrence, Avelar					\$25.00
		6	Contributor address; City; State; Zip Code					
			SAN Antonio, TX 78216-6132					
8	Principal occu	ipa	ion / Job title (See Instructions)	9	Employer (See Instructions	;)		
	Not Employe	ed			Not Employed			
	Date	Г	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/27/2024		Lawrence, VINCENT					\$25.00
		····	Contributor address: City: State: Zip Code					
			Crescent City, CA 95531					
	Principal occu	ıpa	ion / Job title (See Instructions)	Τ	Employer (See Instructions	;)		
	Not Employe	ed			Not Employed			
	Date		Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/27/2024		Lawrence, Williams					\$10.00
		····	Contributor address; City; State; Zip Code					
			Austin, TX 78754					
			ion / Job title (See Instructions)		Employer (See Instructions)		
	Not Employe	ed			Not Employed			
	Date		Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/27/2024		Lea, Emery					\$5.00
			Contributor address; City; State; Zip Code					
			Bellingham, WA 98226					
	•	ipa	ion / Job title (See Instructions)		Employer (See Instructions)		
	Manager				Non-GMO Project			
	Date		Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/27/2024		Leean, O'Connell					\$5.00
		[Contributor address; City; State; Zip Code					
			Stansham MA 00100					
			Stoneham, MA 02180	-		Ļ		
			ion / Job title (See Instructions)		Employer (See Instructions)		
	Not Employe	ed			Not Employed			

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 29/52 Rpt: 32/78	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Venable, De	siree M.			00088377	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	09/27/2024	Leo, Laroco				\$100.00
		6 Contributor address; City; State; Zip Code				,
		Lansdowne, PA 19150				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u> ເ)		
ľ	Software En		Proscia Inc.	-)		
		- 		<u> </u>		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	#7 00
	09/27/2024	Leo, Rodriguez				\$7.00
		Contributor address; City; State; Zip Code				
		Colorado Springs, CO 80917		Ĺ		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Sales		Cos			
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/27/2024	Linda, Yankee				\$10.00
		Contributor address; City; State; Zip Code		1		
		Orlando, FL 32817				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	retired		usa			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/28/2024	Linda D, Allen				\$10.00
		Contributor address; City; State; Zip Code				
		Smithville, TX 78957				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:)	Г	Amount of Contribution (\$)	
	09/30/2024	Linda L, Mattern				\$25.00
		Smithville, TX 78957				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	agriculture		self	-,		
⊢						

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 30/52 Rpt: 33/78
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Venable, Desiree M.	00088377
4 Date 5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
10/09/2024 Linda L, Mattern	\$25.00
6 Contributor address; City; State; Zip Code	
Smithville, TX 78957	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions))
agriculture self	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/27/2024 Lisa, Spradlin	\$10.00
Contributor address; City; State; Zip Code	
Spring Branch, TX 78070	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Systems Admin Farm Credit Bank of Tex	(as
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/07/2024 Lissa, Johnston	\$25.00
Contributor address; City; State; Zip Code	
Smithville, TX 78957	<u></u>
Principal occupation / Job title (See Instructions) Employer (See Instructions))
Not Employed Not Employed	
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/11/2024 Louis, Garza	\$10.00
Contributor address; City; State; Zip Code	
San Antonio TV 70242	
San Antonio, TX 78242 Principal occupation / Job title (See Instructions) Employer (See Instructions)	A contract of the second se
Not Employed Not Employed)
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/28/2024 Louise, Mealer	\$10.00
Contributor address; City; State; Zip Code	
Albany NY 12209	
Albany, NY 12209	A
Principal occupation / Job title (See Instructions) Employer (See Instructions))
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SCHEDULE	A1
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	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 31/52 Rpt: 34/78	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Venable, De	siree M.			00088377	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/10/2024	Lulu, Flores				\$150.00
		6 Contributor address; City; State; Zip Code		1		
		AUSTIN, TX 78704				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions			
	Attorney		Hendler Flores Law PLL	C		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/30/2024	MICHELLE, YAKOVAC				\$50.00
		Contributor address; City; State; Zip Code				
		Cedar Creek, TX 78612				
Γ	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Marketing Re	esearch	Hansa GCR			
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/25/2024	Marc, Montrose				\$25.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78702				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Data analyst	·	GenPrex			
Γ	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/29/2024	Maria, Marusak				\$10.00
		Contributor address; City; State; Zip Code		1		
		Crowley, TX 76036				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Pharmacy Te	echnician	Baylor Scott & White			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/28/2024	Marilyn, Vitiello				\$25.00
		Contributor address; City; State; Zip Code				
		Temecula, CA 92592				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	:d	Not Employed			
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SCHEDULE	A1
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	The Instruction Guide explains how to complete this form.				Total pages Schedule A1: Sch: 32/52 Rpt: 35/78	
2	FILER NAME	FILER NAME			Filer ID (Ethics Commission	n Filers)
	Venable, De	siree M.			00088377	
4	Date	Date 5 Full name of contributor out-of-state PAC (ID#:)			Amount of Contribution (\$)	
	09/27/2024 Mark, Fitt				-	\$150.00
	I	6 Contributor address; City; State; Zip Code				
		Costa Mesa, CA 92627				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	上 5)		
	Not Employe		Not Employed			
╞	Date	Full name of contributor Out-of-state PAC (ID#:	<u> </u>	Γ	Amount of Contribution (\$)	
	10/07/2024	Mark, Fitt	, İ		Allount of contraction (1)	\$100.00
	10/01/212	Contributor address; City; State; Zip Code				
		Continuutor address, City, State, Zip Code				
		Costa Mesa, CA 92627				
⊢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	L;)		
	Not Employe		Not Employed			
┝	Date			—	Amount of Contribution (\$)	
	09/28/2024	Mark, Maddox)			\$25.00
	0312012024					Ψ20.00
		Contributor address; City; State; Zip Code				
		Saginaw, TX 76131				
\vdash	Principal occupation / Job title (See Instructions)		Employer (See Instructions	<u>ר</u>		
	Metrology te		Texas Instruments	9		
╞					Δ	
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	<u> </u>
	09/27/2024	Martha, Koop				\$25.00
		Contributor address; City; State; Zip Code				
		Richland, WA 99352				
┝	Dringingl occu	upation / Job title (See Instructions)	Employer (See Instructions	Γ		
	Not Employe		Employer (See Instructions Not Employed	9		
╘				—		
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)		÷10.00
	09/29/2024	Mary, Cunningham Contributor address; City; State; Zip Code				\$10.00
		Broomfield, CO 80020		L		
Principal occupation / Job title (See Instructions)			Employer (See Instructions	;)		
L	Not Employe	d	Not Employed			

	The Instruction Guide explains how to complete this form.				Total pages Schedule A1: Sch: 33/52 Rpt: 36/78	
2	FILER NAME				Filer ID (Ethics Commission	n Filers)
	Venable, Desiree M.				00088377	-
4	Date	Date 5 Full name of contributor out-of-state PAC (ID#:)			Amount of Contribution (\$)	
	10/11/2024 Mary, Eisenberg				\$25.00	
		6 Contributor address; City; State; Zip Code				
		Lockhart, TX 78644				
8			9 Employer (See Instructions	5)		
	Not Employe	ot Employed Not Employed				
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/27/2024	Mary, Gode				\$10.00
		Contributor address; City; State; Zip Code				
		Sainte Genevieve, MO 63670				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe		Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)		
	09/27/2024 Mary, Lowery Nelson					\$10.00
		Contributor address; City; State; Zip Code				
		Columbus, OH 43203				
-	Principal occu	Principal occupation / Job title (See Instructions) Employer (See Instruction		<u> </u> נו		
			State of Ohio	"		
╞				<u> </u>	Amount of Contribution (ft)	
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)		¢25.00
	09/21/2024	09/27/2024 Maryellen, Rowley				\$25.00
		Contributor address; City; State; Zip Code				
		Camden, DE 19934				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Nurse		Bayhealth medical cente			
╞	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/06/2024	Max, Yancy				\$10.00
	Contributor address: City: State: Zip Code					-
	Austin, TX 78765					
	Principal occupation / Job title (See Instructions) Employer (See Instruction			5)		
	Owner Plum Creek Records &			Та	pes	
Γ						
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SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 34/52 Rpt: 37/78	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Venable, De	siree M.			00088377	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/13/2024	Megan, Hull				\$250.00
		6 Contributor address; City; State; Zip Code		1		
		Washington, DC 20007				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Activist		Self			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/27/2024	Melanie, Artim				\$100.00
		Contributor address; City; State; Zip Code		1		
		Sarasota, FL 34238				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not employe	d	Not employed			
	Date	Full name of contributor Dut-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	10/18/2024	Melanie, Webb				\$10.00
		Contributor address; City; State; Zip Code		1		
		Conroe, TX 77304				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	d	Not Employed	_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/06/2024	Mereida, Cardenas				\$10.00
		Contributor address; City; State; Zip Code]		
	<u> </u>	Crowley, TX 76036		Ĺ		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Sales		NA	_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/27/2024	Michael, Burton		1		\$50.00
		Contributor address; City; State; Zip Code				
		Veleceke Meziriei 75701 Czech Depublie				
┡	Dringing	Valasske Mezirici 75701 Czech Republic	Employer (Cashartant			
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
┡	sales/market	ling	ValCzech Inc			

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	The Instrue	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 35/52 Rpt: 38/78	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Venable, Des	siree M.			00088377	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	09/27/2024	Michael, Hoffmann				\$25.00
		6 Contributor address; City; State; Zip Code		ł		
		1				
	1	Wethersfield, CT 06109				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
	Not employe		Not employed			
╞	Date	Full name of contributor Out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	09/28/2024	Michelle, Barnett	,			\$20.00
	00,20,202	Contributor address; City; State; Zip Code		ł		*-
		Continuation address, City, State, Zip Code				
		1				
	1	Anthony, KS 67003				
⊢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Not Employe		Not Employed	,		
⊢	Date	Full name of contributor Out-of-state PAC (ID#:_		Γ	Amount of Contribution (\$)	
	09/27/2024	Miguel, Mora	/		Allount of Contribution (*)	\$100.00
	00/21/202			ł		Ψ±00.00
		Continuation address, City, State, Lip Code				
		1				
	1	Dallas, TX 75208				
\vdash	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Not Employe		Not Employed	-,		
╞	Date	Full name of contributor Out-of-state PAC (ID#:	l	Π	Amount of Contribution (\$)	
	09/27/2024	Mike, Leghorn	/			\$25.00
	0312112024	-		•		Ψ20.00
		Contributor address; City; State; Zip Code				
		1				
	1	Evanston, IL 60202				
⊢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Web Develop		Wolters Kluwer	-,		
╞	Date			—	Amount of Contribution (\$)	
	09/29/2024	Full name of contributor out-of-state PAC (ID#: Milo, Wadlin	/			\$100.00
	0312312027			•		Ψ100.00
		Contributor address; City; State; Zip Code				
		1				
		Portland, OR 97229				
\vdash	Princinal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Not Employe		Not Employed	<i>י</i> י		
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1:	
Ļ				Ļ	Sch: 36/52 Rpt: 39/78	、
2	FILER NAME			3	Filer ID (Ethics Commission	1 ⊢ilers)
L	Venable, De				00088377	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	± : 0 00
	09/30/2024	Mitzi, Walser				\$10.00
		6 Contributor address; City; State; Zip Code				
Ļ		Comfort, TX 78013	1 <u>-</u> , <u>/o</u> lastrustian	Ĺ		
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Not Employe		Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	_
	09/28/2024	Moneta, Jones				\$10.00
		Contributor address; City; State; Zip Code		1		
		Flint, TX 75762				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Coordinator		UHG			
Γ	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/27/2024	Morgan, Goeller				\$100.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78736				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Engineer		Elastic			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/30/2024	Nancy, Peshette				\$10.00
		Contributor address; City; State; Zip Code				
		AUBURN, CA 95604				
Γ		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/07/2024	Natalie, House				\$25.00
		Contributor address; City; State; Zip Code				
		Clarkston, MI 48346				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Teacher		Waterford Schools			
\vdash			1			

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 37/52 Rpt: 40/78 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Venable, Desiree M. 00088377 Date 4 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 09/29/2024 Neva, Gallegos \$10.00 6 Contributor address; City; State; Zip Code San Antonio, TX 78254 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) LMT Neva Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/02/2024 \$15.00 Nigel, Gusdorf Contributor address; City; State; Zip Code Lockhart, TX 78644 Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Not Employed Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 10/22/2024 Nigel, Gusdorf \$25.00 Contributor address; City; State; Zip Code Lockhart, TX 78644 Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Not Employed Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 09/29/2024 \$25.00 Norman, Hicks Contributor address; City; State; Zip Code Heltonville, IN 47436 Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Not Employed Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 09/30/2024 \$5.00 Nunzio, Izzo Contributor address; City; State; Zip Code Hoboken, NJ 07030 Principal occupation / Job title (See Instructions) Employer (See Instructions) Not Employed Not Employed

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	iorm.	1	Total pages Schedule A1: Sch: 38/52 Rpt: 41/78	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Venable, De	siree M.	I		00088377	
4	Date	5 Full name of contributor Out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	09/27/2024	Patrick, Manfredi			· · · · · · · · · · · · · · · · · · ·	\$10.00
	••••	6 Contributor address; City; State; Zip Code		•		+ -
		Contributor address, City, State, Zip Code	I			
			I			
		Richardson, TX 75082	l			
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	<u>г</u> 3)		
	Not Employe		Not Employed			
⊨	Date	Full name of contributor out-of-state PAC (ID#:_	I)	Γ	Amount of Contribution (\$)	
	09/27/2024	Patrick, Schelling			-	\$10.00
		Contributor address; City; State; Zip Code		1		.
			I			
			l			
		Orlando, FL 32826				
\vdash	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Professor		University of Central Flo	orid	la	
⊨	Date	Full name of contributor Out-of-state PAC (ID#:	I)	Γ	Amount of Contribution (\$)	
	09/27/2024	Paul, Garner			· · · · · · · · · · · · · · · · · · ·	\$250.00
				1		·
			l			
		Dallas, TX 75218	l			
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			
F	Date	Full name of contributor out-of-state PAC (ID#:_		Γ	Amount of Contribution (\$)	
	09/29/2024	Pennie, Maples			-	\$25.00
	I	Contributor address; City; State; Zip Code		1		
		Fort Worth, TX 76140-7632	l			
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Truck Driver		Bimbo Bakeries			
F	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	09/27/2024	Penny Rae, Powell				\$10.00
		Contributor address; City; State; Zip Code		1		
			I			
L		Sacramento, CA 95814				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	3)		
	Not Employe	ed	Not Employed			
\vdash						

SCHEDULE	A1
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The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 39/52 Rpt: 42/78	
2 FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
Venable, De	siree M.			00088377	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
10/01/2024	Perry, Young				\$50.00
	6 Contributor address; City; State; Zip Code		1		
9 Dringingloggy	Buda, TX 78610 pation / Job title (See Instructions)	9 Employer (See Instructions			
Retired	pation / Job title (See Instructions)	Retired	5)		
			<u> </u>		
Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	¢5 00
09/27/2024	Ramona, Walker				\$5.00
	Contributor address; City; State; Zip Code				
	Glassboro, NJ 08028-2637				
Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
Home health		Preferred health			
Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
09/27/2024	Randal, Salazar				\$25.00
	Contributor address; City; State; Zip Code		1		
	Corpus Christi, TX 78413				
	pation / Job title (See Instructions)	Employer (See Instructions	s)		
Superintend	ent	Apex consulting			
Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
09/27/2024	Raymond, Hosler				\$10.00
	Contributor address; City; State; Zip Code]		
	Santa Clara, CA 95050				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
Not Employe		Not Employed	5)		
			T	Amount of Contribution (\$)	
Date 09/29/2024	Full name of contributor out-of-state PAC (ID#: Rebecca, Dimock)		Amount of Contribution (\$)	\$10.00
0312312024			•		Φ10.00
	Contributor address; City; State; Zip Code				
	North Mankato, MN 56003				
Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
Software en		Ibm	-		

SCHEDULE	A1
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	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 40/52 Rpt: 43/78	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Venable, De	siree M.			00088377	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/02/2024	Rebecca, Malcolm				\$10.00
		6 Contributor address; City; State; Zip Code		1		
		Cameron, TX 76520				
8			9 Employer (See Instructions	5)		
	Not Employe	:d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/01/2024	Regina, Hooten				\$10.00
		Contributor address; City; State; Zip Code				
		Elgin, TX 78621				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Not Employe	d.	Not Employed			
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/01/2024	Regina, Hooten				\$50.00
		Contributor address; City; State; Zip Code				
		Elgin, TX 78621				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	d	Not Employed			
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/29/2024	Rich, Fitzpatrick				\$50.00
		Contributor address; City; State; Zip Code				
		Boulder, CO 80304				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Sales Assoc	iate	Home Depot			
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/27/2024	Robert, Dmitrick			-	\$200.00
		Contributor address; City; State; Zip Code				
		······				
		SCOTTSDALE, AZ 85250				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	2d	Not Employed			
⊢						

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 41/52 Rpt: 44/78	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Venable, De	siree M.			00088377	
4	Date	5 Full name of contributor Out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	09/27/2024	Robert, Erman			-	\$5.00
		6 Contributor address; City; State; Zip Code		ł		
		Bridgeport, CT 06604				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	<u>لــــــــــــــــــــــــــــــــــــ</u>		
	Not Employe		Not Employed			
╞	Date	Full name of contributor out-of-state PAC (ID#:		—	Amount of Contribution (\$)	
	09/27/2024	Robert, Tamble	/			\$250.00
	0312112024					φ200.00
		Contributor address; City; State; Zip Code				
		Smithville, TX 78957				
⊢	Dringingl oog			$\sum_{i=1}^{n}$		
		ipation / Job title (See Instructions)	Employer (See Instructions City of Smithville	<i>;</i>)		
	City Manage			—		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/27/2024	Ronald, Williams				\$10.00
	I	Contributor address; City; State; Zip Code				
		l				
		Winterville, NC 28590	1			
		pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Retired		Retired			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/27/2024	Ronika, Williams				\$5.00
	I	Contributor address; City; State; Zip Code		1		
		Kingsville, TX 78363				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Professor		CBC			
╞	Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Γ	Amount of Contribution (\$)	
	09/27/2024	Roy Dean, Campbell			· · · · · · · · · · · · · · · · · · ·	\$25.00
		Contributor address; City; State; Zip Code		\mathbf{I}		
		Aledo, TX 76008				
\vdash	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>لــــــــــــــــــــــــــــــــــــ</u>		
	IT Project Ma		TTI Inc.	''		
\vdash						

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 42/52 Rpt: 45/78	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Venable, De				00088377	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	09/28/2024	Ruby, Gonzalez				\$100.00
		6 Contributor address; City; State; Zip Code		1		
		San Antonio, TX 78247				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Cook		SouthWest Food Service	e		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/26/2024	Ruth, Todd				\$25.00
		Contributor address; City; State; Zip Code		1		
		Bastrop, TX 78602				
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	;d	Not Employed			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Ī	Amount of Contribution (\$)	
	09/28/2024	Sandra, Chilton				\$10.00
		Contributor address; City; State; Zip Code		1		
		Florence, KY 41042	1			
		ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	RN		Hospital	-		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/24/2024	Sandra, Rodriquez]		\$5.00
		Contributor address; City; State; Zip Code				
		fresno, CA 93728				
\vdash	Dringing occu	ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Health care		IHSS	5)		
╞				.		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	ቀር በበ
	10/24/2024	Sandra, Rodriquez				\$5.00
		Contributor address; City; State; Zip Code				
		fresno, CA 93728				
┝	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Care provide		IHSS	5)		
┝		л 				

⊢						
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 43/52 Rpt: 46/78	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Venable, Desiree M.				00088377	
4	Date	5 Full name of contributor Out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
ľ	09/30/2024	Sanjeev, Kaushal	/	·	, in our of 2 (.,	\$50.00
	00/00/202			ł		400.00
	l	6 Contributor address; City; State; Zip Code				
	ļ					
	l	Bossier City, LA 71112				
Ļ	Drincinal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>		
°	Retail		Kiran of Monroe Llc	5)		
L				-		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/30/2024	Sara, Khan				\$5.00
	ļ	Contributor address; City; State; Zip Code		1		
	l					
	l					
	I	CHRISTIANSBURG, VA 24073				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Registered N	lurse	Anthem			
⊨	Date	Full name of contributor Out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/27/2024	Shaun, Samuels	/		Allount of Contribution (+)	\$25.00
	0312112027			ł		Ψ20.00
	ļ	Contributor address; City; State; Zip Code				
	ļ					
	l	Aventura EL 22100				
\vdash	D i sizzi eeu	Aventura, FL 33180		Ĺ		
		ipation / Job title (See Instructions)	Employer (See Instructions	5)		
L	physician		self			
Γ	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/07/2024	Shawn, Fricker				\$100.00
		Contributor address; City; State; Zip Code		1		
	l					
	l					
	I	Seabrook, TX 77586				
\vdash	Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe		Not Employed			
╞	Date			Г	Amount of Contribution (\$)	
	09/28/2024)			\$20.00
	0912012024					Φ20.00
	ļ	Contributor address; City; State; Zip Code				
	l					
	ļ					
L		North Vancouver V7K1K3 Canada				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	1st AD		Entertainment Partners			

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 44/52 Rpt: 47/78	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Venable, De	siree M.			00088377	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	10/03/2024	Sheila, Oliver			-	\$10.00
	I	6 Contributor address; City; State; Zip Code		ł		
	I					
	I					
		Belton, TX 76513				
8			9 Employer (See Instructions	5)		
	Not Employe	2d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/19/2024	Sheril, Smith				\$100.00
	I	Contributor address; City; State; Zip Code]		
	I					
	l	Smithville, TX 78957				
┝	Brincinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> -)		
	Not Employe		Not Employed	>)		
╞				Γ	Amount of Contribution (\$)	
	Date 09/30/2024	Full name of contributor out-of-state PAC (ID#: Sherilyn, Allyn-Wright)		Amount of Contribution (\$)	\$20.00
	0010012027	Contributor address; City; State; Zip Code		$\left \right $		Ψ20.00
	I					
	I					
		Soemrville, TX 77879				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	:d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:)	Ī	Amount of Contribution (\$)	
	10/05/2024	Shonda, Miller				\$25.00
	l	Contributor address; City; State; Zip Code		1		
	I					
	I	Arlington, TX 76016				
┝	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Sales Manag		DAS Simplified	>)		
╞	Date	Full name of contributor out-of-state PAC (ID#:		Г	Amount of Contribution (\$)	
	10/09/2024	Sierra Club Political Committee of Texas	/			\$500.00
	10/00/202	Contributor address; City; State; Zip Code		$\left \right $		Ψ000.00
	l					
	I					
	l	Austin, TX 78765				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	committee	1	Committee			

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 45/52 Rpt: 48/78	
2	FILER NAME			3	Filer ID (Ethics Commission	i Filers)
	Venable, De				00088377	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/02/2024	Stacy, Solis				\$10.00
	I	6 Contributor address; City; State; Zip Code		1		
		McAllen, TX 78501	1			
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Instructor		UTRGV			
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/27/2024	Stephanie, Walters				\$10.00
	I	Contributor address; City; State; Zip Code				
		Ben Wheeler, TX 75754		Ĺ		
		pation / Job title (See Instructions)	Employer (See Instructions CPL labs	5)		
	Lab Tech			_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/30/2024					\$50.00
		Contributor address; City; State; Zip Code				
		Somerville, TX 77879				
\vdash	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Retired		Retired	,		
╞	Date	Full name of contributor Out-of-state PAC (ID#:	<u> </u>		Amount of Contribution (\$)	
	09/27/2024	Steven, Beaty	J		Allount of Contribution (\$)	\$25.00
	00/21/202.	Contributor address; City; State; Zip Code				Ψ20100
		Continuation address, City, State, Zip Code				
		Ridley Park, PA 19078				
⊢	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Eng. Tech	· · · ·	Marriott international			
⊨	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/30/2024	Steven, Walker			,	\$20.00
	-	Contributor address; City; State; Zip Code				
		Las Vegas, NV 89141				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Switchgear c	quotations	Codale electric			
\vdash			1			

SCHEDULE	A1
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	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 46/52 Rpt: 49/78	
2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
	Venable, De				00088377	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/27/2024	Sue Ann, Zimmerman				\$25.00
		6 Contributor address; City; State; Zip Code		1		
		Chestertown, MD 21620				
8		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Not Employe	2d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/27/2024	Sunder, Ramachandran				\$25.00
		Contributor address; City; State; Zip Code		1		
		Sugar Land, TX 77479				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Chemical En	ıgineer	Baker Hughes			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/28/2024	Susan, Beaubian				\$40.00
		Contributor address; City; State; Zip Code		1		
		Las Vegas, NV 89131				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	2d	Not Employed			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/29/2024	Susan, Parker				\$10.00
		Contributor address; City; State; Zip Code		1		
		Braidwood, IL 60408				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/26/2024	Susan, Parker				\$10.00
		Contributor address; City; State; Zip Code		1		
		Braidwood, IL 60408				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	≥d	Not Employed			

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 47/52 Rpt: 50/78	
-	FILER NAME			-	•	n Filoro)
Ĺ	Venable, Desiree M.			3	Filer ID (Ethics Commission 00088377	IT FILETS)
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	09/28/2024	Susan, Zulkowski				\$100.00
	6 Contributor address; City; State; Zip Code			1		
		Bastrop, TX 78602				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:_	·)		Amount of Contribution (\$)	
	10/01/2024	Suzanne, Costner				\$5.00
		Contributor address; City; State; Zip Code		1		
		Orlando, FL 32807				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Writer		Self			
	Date	Full name of contributor out-of-state PAC (ID#:_	·)		Amount of Contribution (\$)	
	09/29/2024	Suzanne, Leslie				\$10.00
		Contributor address; City; State; Zip Code				
		Dallas, TX 75230				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney		Retired			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/29/2024	Tamrah, Gutierrez				\$25.00
		Contributor address; City; State; Zip Code		1		
		Prunedale, CA 93907				
		pation / Job title (See Instructions)	Employer (See Instructions			
	VP Sales		Coastline Family Farms			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/27/2024	Teresa, Rasti				\$10.00
	Contributor address; City; State; Zip Code			1		
L		San Antonio, TX 78250				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
L	Not Employe	ed	Not Employed			
1						

SCHEDULE	A1
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	The Instruc	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 48/52 Rpt: 51/78	
2	FILER NAME		3	Filer ID (Ethics Commission	n Filers)	
	Venable, De	siree M.		00088377	-	
4	Date	5 Full name of contributor Out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	09/27/2024	Terry, Yamada			\$50.00	
		6 Contributor address; City; State; Zip Code				
		Rancho Palos Verdes, CA 90275				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Not Employe	b;d	Not Employed			
F	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/29/2024	Texas AFL-CIO STATE COPE FUND				\$500.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78711				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	committee		Committee			
F	Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>		Amount of Contribution (\$)	
	09/27/2024	Thomas, Moll				\$50.00
		Contributor address; City; State; Zip Code				
		Bothell, WA 98011	1			
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retail		Starbucks			
	Date	Full name of contributor out-of-state PAC (ID#:)	ſ	Amount of Contribution (\$)	
	09/27/2024	Tiffany, Twomey				\$5.00
		Contributor address; City; State; Zip Code				
		Haraaahaa Day, TV 70657				
\vdash	Drizsingl oppu	Horseshoe Bay, TX 78657				
	Landscaping	ipation / Job title (See Instructions)	Employer (See Instructions HSB contracting	5)		
				-		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	<u>م</u> ح مم
	09/28/2024	Timothy, Rabroker				\$5.00
		Contributor address; City; State; Zip Code				
		Killeen, TX 76542				
┝	Drincinal occu		Employer (See Instructions	<u> </u>		
	Firefighter	ipation / Job title (See Instructions)	City of Killeen	5)		
	Fileliyinei					

SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this f	Total pages Schedule A1: Sch: 49/52 Rpt: 52/78						
2	FILER NAME		3	Filer ID (Ethics Commissio	n Filers)				
	Venable, De	siree M.		00088377					
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	7	Amount of Contribution (\$)					
	09/27/2024	Tom, Wheeler)			\$50.00			
	00.2	6 Contributor address; City; State; Zip Code							
l		Contributor address, City, State, Zip Code							
		Corinth, TX 76208							
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	;)					
-	ALJ	, , , , , , , , , , , , , , , , , , ,	SSA	',					
╞	Date	Full name of contributor Out-of-state PAC (ID#:		<u> </u>	Amount of Contribution (\$)				
	Dale 09/29/2024	Full name of contributor out-of-state PAC (ID#: Tomas, Torres)			\$15,000.00			
	0912912024				4	\$13,000.00			
		Contributor address; City; State; Zip Code							
		Houston, TX 77027							
┝	Drincinal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> •)					
	Not Employe		Not Employed	"					
╘				1					
	Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	\$10.00				
	10/06/2024		-						
		Contributor address; City; State; Zip Code							
		Austin TV 70704							
\vdash	Drinsipal again	Austin, TX 78704	Employer (See Instructions						
		ipation / Job title (See Instructions)	5)						
	Not Employe		Not Employed	_					
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)				
	10/12/2024	Tricia, Lenington				\$60.00			
		Contributor address; City; State; Zip Code		1					
		Elgin, TX 78621							
		ipation / Job title (See Instructions)	Employer (See Instructions	5)					
	Secretary		Ascension Seton						
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)				
	09/30/2024	Virginia, Reyes				\$25.00			
		Contributor address; City; State; Zip Code							
		Austin, TX 78746							
Γ	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)					
	Admin		Wheeler Appraisal LLC						

L					
	The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 50/52 Rpt: 53/78	
2	FILER NAME		3 Filer ID (Ethics Commission Filers))	
	Venable, De	siree M.	00088377		
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
	09/27/2024	Wesley, Henry		\$50	0.00
		6 Contributor address; City; State; Zip Code			
	ļ				
	ļ				
		Philadelphia, PA 19148			
8		ipation / Job title (See Instructions)	9 Employer (See Instructions	;)	
	Researcher		Big 4 accounting firm		
	Date	-	ť:)	Amount of Contribution (\$)	_
	10/03/2024	William, Dreisbach		\$6	6.66
	ļ	Contributor address; City; State; Zip Code			
	ļ				
		Modford NILOROEE			
┝	Dringing occu	Medford, NJ 08055 Ipation / Job title (See Instructions)	Employer (See Instructions		
	Not Employe		Not Employed)	
╞				Lancount of Contribution (¢)	
	Date 10/06/2024	Full name of contributor Out-of-state PAC (ID#: William, Farmer	t:)	Amount of Contribution (\$) \$10	00
	10/00/2024			ψτυ	.00
		Contributor address; City; State; Zip Code			
		Georgetown, TX 78628			
\vdash	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	۲ ۶)	
	Supervisor		Samsung Austin semico	onductor	
F	Date	Full name of contributor out-of-state PAC (ID#)	Amount of Contribution (\$)	
	10/16/2024	Zetta, Hackleman		\$25	5.00
	1	Contributor address; City; State; Zip Code			
	ļ				
		Bastrop, TX 78602	1		
		ipation / Job title (See Instructions)	Employer (See Instructions	\$)	
	RN		ASMCA		
	Date	Full name of contributor out-of-state PAC (ID#)	Amount of Contribution (\$)	
	10/04/2024	adrian, rueda		\$50	1.00
		Contributor address; City; State; Zip Code			
		Arlington, TX 76013			
⊢	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
	Police officer		Dallas independent sch		
⊢					

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 51/52 Rpt: 54/78			
2	FILER NAME		3	Filer ID (Ethics Commission	n Filers)			
	Venable, De			00088377				
4		5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)			
	09/27/2024	gilberto, garcia			\$10.00			
	-							
		Monterey, CA 93940						
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)				
	Not Employe		Not Employed	-				
╞	Date	Full name of contributor Out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)			
	09/27/2024	helaine, todaro			, who can be a carrier of the carrie	\$3.00		
	••••	Contributor address; City; State; Zip Code		\mathbf{I}		Ŧ		
	ļ	Westbury, NY 11590-6407						
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)				
	operations	· · · · · · · · · · · · · · · · · · ·	OTFS					
⊨	Date	Full name of contributor Out-of-state PAC (ID#:	<u> </u>	Γ	Amount of Contribution (\$)			
	09/27/2024	james, movido			· · · · · · · · · · · · · · · · · · ·	\$20.00		
	••••	Contributor address; City; State; Zip Code		\mathbf{I}		* -		
	ļ							
	ļ							
		Canoga Park, CA 91304						
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)				
	Systems Ana	alyst	Centene					
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)			
	09/28/2024	julio, lopez				\$5.00		
		Contributor address; City; State; Zip Code		1				
	ļ							
	ł							
		Sacramento, CA 95833						
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)				
	system opera	ator	calwater					
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)			
	09/28/2024	les, ruthven				\$100.00		
	ł	Contributor address; City; State; Zip Code		1				
	ļ							
	ļ							
		Houston, TX 77009						
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)				
	Software Dev	veloper	Shell					

	The Instrue	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 52/52 Rpt: 55/78	
2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
	Venable, Des	siree M		00088377		
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/27/2024	margaret, wysatta				\$25.00
		6 Contributor address; City; State; Zip Code		1		
		kingwood, TX 77345				
8		· · · · ·	9 Employer (See Instructions	;)		
	Not Employe	.d	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/27/2024	sandy, lester				\$25.00
		Contributor address; City; State; Zip Code		1		
		Lennon, MI 48449	-			
		pation / Job title (See Instructions)	Employer (See Instructions	3)		
	Dog walker		Ме			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/29/2024	shawna, burris				\$5.00
	1	Contributor address; City; State; Zip Code		1		
		Lake Isabella, CA 93240				
		pation / Job title (See Instructions)	Employer (See Instructions	3)		
	Food Directo	ır	School			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/29/2024	shawna, burris			\$5.00	
		Contributor address; City; State; Zip Code		1		
		Lake Isabella, CA 93240				
		pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Food Directo	ır	School			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/27/2024	steven, yohe				\$10.00
	1	Contributor address; City; State; Zip Code	Ţ	1		
		Lancaster, PA 17602	-			
		pation / Job title (See Instructions)	Employer (See Instructions			
	support spec	ialist	Donnelley Financial Solu	utic	ons	

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)			
	Sch: 1/18 Rpt: 56/78		Venable, Desiree M.					00088377			
4	Date	5	Payee name								
	10/23/2024		3268 MCD PUR AMAZON MKTPL C	C27SP1H8	33						
6	Amount (\$)	7	Payee address; City; Sta	te; Zip Co	ode						
	\$151.54		325 9thAve. N								
			SEATLLE, WA 98109-5210								
8	PURPOSE	(2)			(h)	Description					
°	OF	(a)	Category (See Categories listed at the top of this s Salaries/Wages/Contract Labor	schedule)	(0)	Description	outsi	ide of Texas. Complete Schedule T.			
	EXPENDITURE		Salaries/Wages/Contract Labor					, officeholder living expense			
						SALARIES					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office sou	ught			Office held			
_	Data										
	Date		Payee name								
	10/23/2024		3268 MCD PUR BASTROP COPIER								
	Amount (\$)		Payee address; City; Sta	te; Zip Co	ode						
	\$64.20		1002 N MAIN ST								
			BASTROP, TX 78602								
	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description					
	OF		Polling Expense	oonouulo)			outsi	utside of Texas. Complete Schedule T.			
	EXPENDITURE		5				, TX,	, officeholder living expense			
						POLLING					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ught			Office held			
	Date		Payee name								
	10/17/2024		3268 MCD PUR HOTCARDS PRINT	г							
	Amount (\$)			te; Zip Co	Jue						
	\$170.08		080 US-290								
			CHAGRIN FALLS, OH 44022		-						
	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description					
	OF EXPENDITURE		Consulting Expense					ide of Texas. Complete Schedule T.			
							, TX,	, officeholder living expense			
						CONSULT					
		L		05				Office heads			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ight			Office held			
		-									

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment			Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Office Over Polling Exp Printing Exp Salaries/Wa	oense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)			
	Sch: 2/18 Rpt: 57/78		Venable, Desiree M.				00088377			
4	Date 10/21/2024	5	Payee name 3268 MCD PUR SQ TOUGH COOKIE B							
_		<u> </u>	-		1-					
6 Amount (\$) 7 Payee address; City; State; Zip Code \$22.13 1003 Main St										
			BASTROP, TX 78602							
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sched Printing Expense	lule)			de of Texas. Complete Schedule T. officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name Off	fice soug	ht		Office held			
	Date		Payee name							
	10/23/2024		3268 PUR FRESH N UP							
	Amount (\$) \$9.99		Payee address; City; State; HWY 95	Zip Coo	le					
			BASTROP, TX 78602							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sched Printing Expense	lule)			de of Texas. Complete Schedule T. . officeholder living expense			
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name Off	fice soug	ht		Office held			
	Date		Payee name							
	10/23/2024		3268 PUR HWY 95 BREAD BA							
	Amount (\$) \$114.84		Payee address; City; State; HWY 95	Zip Coo	le					
			BASTROP, TX 78602							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sched Printing Expense	dule)			de of Texas. Complete Schedule T. . officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name Off	fice soug	ht		Office held			

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)					
	Sch: 3/18 Rpt: 58/78	Venable, Desiree M.	00088377					
4	Date	5 Payee name						
	10/22/2024	3268 PUR USPS PO 4815450612						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$1,288.00	STATE HWY 71W US-183						
		CEDAR CREEK, TX 78612						
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	EXPENDITURE		butside of Texas. Complete Schedule T.					
			TX, officeholder living expense					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	10/22/2024	3268 PUR USPS PO 4852400644						
	Amount (\$)	Payee address; City; State; Zip Code						
\$1,400.00 1711 S COLORADO ST								
		LOCKHART, TX 78644						
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	10/17/2024	3268 PUR USPS						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$4,424.00	1106 MAIN ST						
		BASTROP, TX 78602						
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Printing Expense Check if travel of	outside of Texas. Complete Schedule T.					
	EXPENDITURE		TX, officeholder living expense					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					

	EXPENDITURE CATEGORIES FOR BOX 8(a)												
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhead/Rental Expense Tr Food/Beverage Expense Polling Expense Tr - Gitf/Awards/Memorials Expense Printing Expense Tr								Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAM	E						3	Filer ID	(Ethics Commission Filers)
	Sch: 4/18 Rpt: 59/78		Venable, D	esiree N	l.						00088377		
4	Date	5	Payee name	•									
	10/17/2024		3268 PUR		ART								
6	Amount (\$)	7	Payee addre	ess; C	city;	State;	Zip Co	de					
	\$59.41		488 State I	Hwy 71									
				-									
			BASTROP	. TX 786	02								
8	PURPOSE	(a)			es listed at the top			(b)	Description				
Ũ	OF	(~)	Printing Ex		es listed at the top	of this schee	dule)	()		outsi	de of Texas. Cor	mple	te Schedule T.
	EXPENDITURE			poneo					Check if Austin	, TX,	officeholder livir	ng ex	pense
									PRINTING				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Of	ïceholder	name	Of	ffice sou	ght			Office h	neld	
	Date		Payee name	;									
	10/21/2024		3269 MCD	PUR SC	TOUGH C	OOKIE E	BAKER						
	Amount (\$)		Payee addre	ess: C	city;	State:	Zip Co	de					
\$15.43 1003 Main St													
	+20110		2000										
			BASTROP	, TX 786	02								
	PURPOSE OF	(a)			es listed at the top	of this schee	dule)	(b)	Description				
	EXPENDITURE		Food/Beve	rage Exp	bense						de of Texas. Cor officeholder livir	•	
									FOOD	, 17,		ng cx	
	Complete ONLY if direct	L(Candidate/Of	iceholder	name	Of	ffice sour	aht			Office h	neld	
	expenditure to benefit C/OI	Н						,					
╞─	Date		Payee name										
	10/21/2024				TOUGH C	OOKIE E	BAKER						
	Amount (\$)		Payee addre		; ity;		Zip Co	de.					
	\$9.39		1003 Main		ity,	oluic,	2ip 00						
	\$0100		1000 Main	01									
			BASTROP	, TX 786	02								
	PURPOSE OF	(a)			es listed at the top	of this schee	dule)	(b)	Description				
	EXPENDITURE		Food/Beve	rage Exp	bense						de of Texas. Cor		
										, IX,	officeholder livir	ng ex	pense
-	Complete ONLY if direct	L	Candidate/Of	iceholder	name	01	ffice sou	thr			Office h	hlar	
	expenditure to benefit C/OI		Sanuluale/UI	ICCI IUIUEI	name	U	111CE 20U	JIII			Unice I	ieiu	

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

		EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)								
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)								
	Sch: 5/18 Rpt: 60/78	Venable, Desiree M.	00088377								
4	Date 10/26/2024										
6	Amount (\$) \$996.23	Payee address; City; State; Zip Code 366 Summer St Somerville, MA 02144									
8	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								
	Date	Payee name									
	09/27/2024	BANTHA, NATHAN									
	Amount (\$) \$747.00	Payee address; City; State; Zip Code 169 Kaanapali Ln BASTROP, TX 78602									
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense								
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								
	Date 10/16/2024	Payee name BANTHA, NATHAN									
	Amount (\$) \$990.00	Payee address; City; State; Zip Code 169 Kaanapali Ln									
		BASTROP, TX 78602									
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense								
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held								

		EXPENDITURE CATEGORIES FOR BOX 8(a)
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel Ot of District
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 6/18 Rpt: 61/78	Venable, Desiree M. 00088377
4	Date	5 Payee name
	10/08/2024	COLLECTIVE CAMPA SALE
6	Amount (\$)	7 Payee address; City; State; Zip Code
•	\$1,511.72	3607 Greystone Drive
		AUSTIN, TX 78731
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense PRINTING
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/17/2024	COLLECTIVE CAMPA SALE
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,451.84	3607 Greystone Drive
		AUSTIN, TX 78731
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense SALARIES
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/16/2024	CURTIS, RICHARD
	Amount (\$) \$369.00	Payee address; City; State; Zip Code 200 N GAINES RD
		CEDAR CREEK, TX 78612
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense SALARIES
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

			EXPENDITURE	CATEGOR	RIES FOR	BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp mmittee Legal Services The Instruction Guide		Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)				
	Sch: 7/18 Rpt: 62/78		Venable, Desiree M.					00088377				
4	Date	5	Payee name									
	10/23/2024		CURTIS, RICHARD									
6	Amount (\$)	7	Payee address; City; State; Zip Code									
	\$342.00		200 N GAINES RD									
		CEDAR CREEK, TX 78612										
8	PURPOSE	(a)	Category (See Categories listed at the te	op of this sche	edule)	(b) Description						
	OF EXPENDITURE		Printing Expense		ŕ	Check if travel		ide of Texas. Complete Schedule T.				
							, ТХ,	, officeholder living expense				
						PRINTING						
9	Complete ONLY if direct		Candidate/Officeholder name		Office sou	uht		Office held				
9	expenditure to benefit C/OI		Landidate/Oncentitider frame		Jilice Sou	ji it		Onice neid				
	Date		Payee name									
	10/18/2024		LASER SIGN									
	Amount (\$)		Payee address; City;	State;	Zip Co	le						
	\$420.00		1109 S MAIN									
			LOCKHART, TX 78644									
	PURPOSE	(a)	Category (See Categories listed at the te	op of this sch	edule)	(b) Description						
	OF EXPENDITURE		Event Expense					side of Texas. Complete Schedule T.				
							I, IX,	, officeholder living expense				
						EVENT						
	Complete ONLY if direct		Candidate/Officeholder name		Office sou	uht		Office held				
	expenditure to benefit C/OI					jin		Once held				
_	Date	<u> </u>	Payee name									
	10/22/2024		LASER SIGN									
				Ctoto	Zin Co	10						
	Amount (\$)		Payee address; City;	State;	Zip Co	le						
	\$300.00		1109 S MAIN									
			LOCKHART, TX 78644									
	PURPOSE	(a)	Category (See Categories listed at the te	op of this sch	edule)	(b) Description						
	OF EXPENDITURE		Food/Beverage Expense					ide of Texas. Complete Schedule T.				
							I, TX,	a, officeholder living expense				
						FOOD						
	Complete ONU V if direct	Ľ	Candidate/Officeholder name)ffing agoin	ubt		Office held				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Januluale/Onicenoluer name	C	Office sou	jiit		Once neid				

			EXPENDITURE CATEGO	ORIES FOR	R BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense nmittee Legal Services The Instruction Guide explain:	Office Ove Polling Ex Printing E Salaries/V	xpense Vages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2	FILER NAME	Filer ID (Ethics Commission Filers)								
	Sch: 8/18 Rpt: 63/78		Venable, Desiree M. 00088377									
4	Date	5	Payee name									
	10/01/2024	MCD PUR ACME PARTNERSHIP LP										
6	Amount (\$)	Int (\$) 7 Payee address; City; State; Zip Code										
	\$3,686.00		3701 Bee Caves Rd STE 101									
		WEST LAKE HIL, TX 78746										
8	PURPOSE	(a)	Category (See Categories listed at the top of this se	chedule)	(b) Description							
	OF EXPENDITURE		Printing Expense				ide of Texas. Complete Schedule T.					
						і, ТХ	, officeholder living expense					
					PRINTING							
_				0/1	1.		0///					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	gnt		Office held					
	Date		Payee name									
	10/08/2024		MCD PUR ACME PARTNERSHIP LF	b								
	Amount (\$)		Payee address; City; Stat	e; Zip Co	de							
	\$1,375.00		3701 Bee Caves Rd									
	. ,											
			WEST LAKE HIL, TX 78746									
	PURPOSE	(a)	Category (See Categories listed at the top of this se	chedule)	(b) Description							
	OF EXPENDITURE		Office Overhead/Rental Expense				ide of Texas. Complete Schedule T.					
						I, IX	, officeholder living expense					
					OVERHEAD							
_			Soundindate (Office le al de sur porte a	Office cou	a la t							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office sou	gnt		Office held					
	Date		Payee name									
	10/08/2024		MCD PUR CAMPAIGN VERIFY									
	Amount (\$)		Payee address; City; Stat	e; Zip Co	de							
	\$95.00		1215 31st Street NW PO BOX 354									
			WASHINGTON, DC 20001									
	PURPOSE	(a)	Category (See Categories listed at the top of this se	chedule)	(b) Description							
	OF EXPENDITURE		Food/Beverage Expense	,	Check if travel	outs	ide of Texas. Complete Schedule T.					
	EXPENDITORE					I, TX	, officeholder living expense					
					FOOD							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ght		Office held					
	experiance to benefit C/OI											

			EXPENDITURE CA	TEGORIE	S FOR	BOX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exper	Lu O Pise P S	oan Repay Office Overl Polling Expe Printing Exp Salaries/Wa	ment/Reimbursement head/Rental Expense ense ges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 9/18 Rpt: 64/78		Venable, Desiree M.					00088377
4	Date	5	Payee name					
	10/03/2024		MCD PUR DOLLAR GENERAL					
6	Amount (\$)	7	Payee address; City;	State; Z	Zip Cod	e		
	\$3.79		410 S Magnolia Ave		•			
			5					
			LULING, TX 78648					
8	PURPOSE	<u> </u>	Category (See Categories listed at the top	- 6 41-2		b) Description		
Ũ	OF	(")	Office Overhead/Rental Expens		lie)		outsi	ide of Texas. Complete Schedule T.
	EXPENDITURE			•		Check if Austir	ı, ТХ,	, officeholder living expense
						OVERHEAD		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Offi	ice soug	ht		Office held
	Date		Payee name					
	10/03/2024		MCD PUR FEDEX OFFICE					
	Amount (\$)		Payee address; City;	State; Z	Zip Cod	e		
	\$34.94		9500 I-35 L550					
			AUSTIN, TX 78748					
	PURPOSE	(a)	Category (See Categories listed at the top	of this schedu	ule) (b) Description		
	OF EXPENDITURE		Advertising Expense					ide of Texas. Complete Schedule T.
							ι, TΧ,	, officeholder living expense
						ADVERTISE		
	Complete ONLY if direct		Candidate/Officeholder name	Offi	ice soug	ht		Office held
	expenditure to benefit C/OF			Olli	ice soug	iii.		Office field
	Data	_						
	Date 10/03/2024		Payee name MCD PUR GANNETT MEDIA C	`O				
	Amount (\$)		Payee address; City;	State; Z	Zip Cod	e		
	\$15.98		7950 Jones Branch Dr FL 8					
			MCLEAN, VA 22043					
	PURPOSE OF	(a)	Category (See Categories listed at the top	of this schedu	ule) (b) Description		
	EXPENDITURE		Event Expense					ide of Texas. Complete Schedule T. , officeholder living expense
						EVENT	I, I <i>N</i> ,	
-	Complete ONLY if direct	<u>ر</u>	Candidate/Officeholder name	Offi	ice soug	ht		Office held
	expenditure to benefit C/Oł					-		
-								

			E	XPENDITURE CA	ATEGOF	RIES FOR	BO	X 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Office Overhead/Rental Expense T Food/Beverage Expense Polling Expense T Gift/Awards/Memorials Expense Printing Expense T						Travel in District Travel Out of Dis	quipment & Related Exper		
1	Total pages Schedule F1:	2	FILER NAME							Filer ID	(Ethics Commission I	Filers)
	Sch: 10/18 Rpt: 65/78	Venable, Desiree M. 00088377										
4	Date 09/27/2024	5	Payee name MCD PUR HOT	CARDS PRINT								
6	Amount (\$)	7	Payee address;	City;	State;	Zip Co	de					
	\$449.80											
			CHAGRIN FALL	.S, OH 44022								
8	PURPOSE OF EXPENDITURE	(a)	Category _{(See Cate} Printing Expense		of this sche	edule)	[le of Texas. Com officeholder living	plete Schedule T. expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		andidate/Officehol	der name	C	Office sou	ght			Office he	eld	
	Date		Payee name									
	10/04/2024		MCD PUR JALIS	SCO RESTAUR	RANT							
	Amount (\$)		Payee address;	City;	State;	Zip Co	de					
	\$50.00		495 State Hwy 7 BASTROP, TX 7									
	PURPOSE OF EXPENDITURE	(a)	Category _{(See Cate} Advertising Expe		of this sche	edule)	[de of Texas. Com officeholder living	plete Schedule T. expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officehol	der name	С	Office sou	ght			Office he	eld	
	Date		Payee name									
	10/02/2024		MCD PUR MAIL	CHIMP								
	Amount (\$) \$20.55		Payee address; 405 N Angier Av	City; re. NE	State;	Zip Coo	de					
			ATLANTA, GA 3	0308								
	PURPOSE OF EXPENDITURE	(a)	Category _{(See Cate} Event Expense	gories listed at the top	of this sche	edule)	[le of Texas. Com officeholder living	plete Schedule T. expense	
	Complete ONLY if direct expenditure to benefit C/O		andidate/Officehol	der name	C	Dffice sou	ght			Office he	eld	

			EXPENDITURI	E CATEGOR	RIES FOF	BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment							Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME	Filer ID (Ethics Commission Filers)							
	Sch: 11/18 Rpt: 66/78		Venable, Desiree M.					00088377			
4	Date	5	Payee name								
	10/02/2024		MCD PUR NGP VAN INC MOTO								
6	Amount (\$)	7	Payee address; City;	State;	; Zip Co	de					
	\$133.25		655 15th St. NW								
		WASHINGTON, DC 20005									
8	PURPOSE	(a)	Category (See Categories listed at th	e ton of this sch	edule)	(b) Description					
	OF EXPENDITURE		Advertising Expense		icuaic)		outsi	ide of Texas. Complete Schedule T.			
	EXPENDITORE							, officeholder living expense			
						ADVERTISE					
_						1					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Ĺ	Office sou	gnt		Office held			
	Date		Payee name								
	10/11/2024		MCD PUR P. TERRY S BUI	RGER STA	٨N						
	Amount (\$)		Payee address; City;	State;	; Zip Co	de					
	\$21.76		484 State Hwy 71								
			BASTROP, TX 78602								
_	PURPOSE	(a)				(b) Description					
	OF	"	Category (See Categories listed at th Food/Beverage Expense	e top of this sch	iedule)		outsi	ide of Texas. Complete Schedule T.			
	EXPENDITURE					Check if Austin	I, TX	, officeholder living expense			
						FOOD					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	C	Office sou	ght		Office held			
	Date		Payee name								
	10/08/2024		MCD PUR PAYPAL ASHAD	E TECH							
	Amount (\$)		Payee address; City;	State;	; Zip Co	de					
	\$2,000.00		1000 MAIN ST								
			HOUSTON, TX 77002								
	PURPOSE	(a)	Category (See Categories listed at th	e top of this sch	iedule)	(b) Description					
	OF EXPENDITURE		Office Overhead/Rental Exp	ense				ide of Texas. Complete Schedule T.			
							I, TX,	, officeholder living expense			
						OVERHEAD					
	Complete ONLY if direct	L	Candidate/Officeholder name	C	Office sou	nht		Office held			
	expenditure to benefit C/Oł				2.1100 000	g					

				EXP		ATEGOR	RIES FOR	во	X 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment						t/Reimbursement /Rental Expense e /Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2	FILER NAM	E						3	Filer ID	((Ethics Commission Filers)
	Sch: 12/18 Rpt: 67/78		Venable, D	esiree l	М.						00088377	7	
4	Date	5	Payee name	9									
	10/15/2024		MCD PUR	SQ CH	EMN CAFE								
6	Amount (\$)	7	Payee addre	ess;	City;	State;	Zip Co	de					
	\$6.89		114 N Maiı	ו St									
			ELGIN, TX	78621									
8	PURPOSE	(a)	Category (s	See Catego	ries listed at the to	o of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Printing Ex				suulo)		Check if travel	outsi	de of Texas. Co	omple	ete Schedule T.
	EXPENDITORE								Check if Austin	, TX,	officeholder liv	ing ex	xpense
									PRINTING				
_											015		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Of	ficeholde	er name	C	Office sou	ght			Office	held]
	Date		Payee name	è									
	10/15/2024		MCD PUR	SQ CH	EMN CAFE								
	Amount (\$)		Payee addre	ess;	City;	State;	Zip Co	de					
	\$25.89		114 N Maiı	n St									
			ELGIN, TX	78621									
	PURPOSE	(a)	Category (s	See Catego	ries listed at the to	n of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Food/Beve				,		Check if travel	outsi	de of Texas. Co	omple	ete Schedule T.
	EXPENDITORE								Check if Austin	, TX,	officeholder liv	ing e	xpense
									FOOD				
	Complete ONL V if direct		Condidate/Of	fiacholda)ffice cour	wht			Office	hole	4
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Of	licenoide	ername	U	office sou	yni			Office	neic	1
	Dete	1	_										
	Date 10/07/2024		Payee name		BA S DELI F	0177⊏							
	Amount (\$)		Payee addre		City;	State;	Zip Co	de					
	\$14.83		185 W Aus	tin St,									
			GIDDINGS	· TV 70	042								
	DUDDOCT			-			i	(1-)	<u> </u>				
	PURPOSE OF				ries listed at the to	p of this sche	edule)	(a)	Description	nutsi	de of Texas Co	omnle	ete Schedule T.
	EXPENDITURE		Event Expe	ense					Check if Austin			•	
									EVENT			-	
	Complete ONLY if direct		Candidate/Of	ficeholde	er name	C	Office sou	ght			Office	helc	t
	expenditure to benefit C/OI	Н											

			EXPENDITURE CA	TEGORIES	FOR	BOX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expens Imittee Legal Services The Instruction Guide ex	Offic Poll se Prin Sala	ce Overh ing Expe ating Exp aries/Wa	ense ges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers	s)	
	Sch: 13/18 Rpt: 68/78		Venable, Desiree M.					00088377		
4	Date	5	Payee name				I			
	10/01/2024		MCD PUR SQ TORTILLERIA M	I TIE						
6	Amount (\$)	7	Payee address; City;	State; Zip	o Cod	e				
	\$77.79		525 TX-36	· · ·						
		CALDWELL, TX 77896								
8	PURPOSE	(a)				b) Description				
Ŭ	OF	(4)	Category (See Categories listed at the top of Salaries/Wages/Contract Labor	of this schedule)			outsi	ide of Texas. Complete Schedule T.		
	EXPENDITURE		Calaries, Wages, Contract Eason			Check if Austir	ι, TX,	, officeholder living expense		
						SALARIES				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office	e soug	nt		Office held		
	Date		Payee name							
	10/07/2024		MCD PUR TELLO US							
	Amount (\$)		Payee address; City;	State; Zip	o Cod	e				
	\$9.83		4780 ASHFORD DUNWOODY F	RD						
			ATLANTA, GA 30338							
	PURPOSE	(a)	Category (See Categories listed at the top of	of this schedule)) (b) Description				
	OF EXPENDITURE		Food/Beverage Expense					ide of Texas. Complete Schedule T. , officeholder living expense		
						FOOD	I, IA,	, oncenduer living expense		
						1000				
	Complete ONLY if direct		Candidate/Officeholder name	Office	e soug	nt		Office held		
	expenditure to benefit C/OF									
	Date		Payee name						—	
	10/03/2024		MCD PUR TST							
	Amount (\$)		Payee address; City;	State; Zip	a Cod	2				
	\$59.52		4060 S INTERSTATE			C .				
	φ 3 3.32									
			SAN MARCOS, TX 75028							
	PURPOSE	(a)	Category (See Categories listed at the top of	of this schedule)) (b) Description				
	OF EXPENDITURE		Event Expense					ide of Texas. Complete Schedule T.		
							ι, TX,	, officeholder living expense		
						EVENT				
	Complete ONU V Stallaget	Ļ	Condidate (Office balder /	04		at		Office held		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office	e soug	IL		Office held		

			EXPENDITURE CATEO	GORIES FO	R B	OX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense nmittee Legal Services The Instruction Guide explai	Office Ov Polling E Printing E Salaries/	verhea xpens Expens Wages	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 14/18 Rpt: 69/78		Venable, Desiree M.					00088377
4	Date	5	Payee name					
	10/15/2024		MCD PUR WHATABURGER					
6	Amount (\$)	7	Payee address; City; Sta	ate; Zip C	ode			
-	\$21.90	ľ	1392 W HWY 290	,p				
			ELGIN, TX 78621					
8	DUDDOCE				(b)	.		
ð	PURPOSE OF	(a)	Category (See Categories listed at the top of this Food/Beverage Expense	schedule)	(0)	Description	outsi	de of Texas. Complete Schedule T.
	EXPENDITURE		Food/Beverage Expense					officeholder living expense
						FOOD		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name	Office sou	ught			Office held
	Date		Payee name					
	10/15/2024		MCD PUR WHATABURGER					
	Amount (\$)		Payee address; City; Sta	ate; Zip C	ode			
	\$24.82		1393 W HWY 290					
			ELGIN, TX 78621					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this Food/Beverage Expense	schedule)	(b)			de of Texas. Complete Schedule T. officeholder living expense
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	l uaht			Office held
	expenditure to benefit C/OI				- 9			
-	Date		Payee name					
	10/26/2024		PAYPAL HQREXPRESS					
			-	ate; Zip Co	odo			
	Amount (\$) \$189.44		Payee address; City; Sta 2211 n 1st st.	ale, Zip Ci	oue			
	φ109.44		2211 11 15t 5t.					
			Sanjose, CA 95131		-			
	PURPOSE OF	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description		
	EXPENDITURE		Printing Expense					de of Texas. Complete Schedule T. officeholder living expense
	Complete ONLY if direct	L(Candidate/Officeholder name	Office sou	L uaht			Office held
	expenditure to benefit C/OI			2				
-								

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)			
-	Sch: 15/18 Rpt: 70/78	Venable, Desiree M.	00088377			
4	Date 10/02/2024	5 Payee name PUR DOLLAR GE DG 126021470				
6	Amount (\$) \$104.95	7 Payee address; City; State; Zip Code 707 Old Austin Hwy BASTROP, TX 78602				
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	10/10/2024	PUR DOLLARTRE				
	Amount (\$) \$8.66	Payee address; City; State; Zip Code 439 State Hwy 71 BASTROP, TX 78602				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	outside of Texas. Complete Schedule T. , TX, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	10/23/2024	PUR HWY 95 BREAD BA				
	Amount (\$) \$5.72	Payee address; City; State; Zip Code HWY 95				
		BASTROP, TX 78602				
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense			
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)			
1	Sch: 16/18 Rpt: 71/78	Venable, Desiree M.	00088377			
4	Date 10/15/2024	5 Payee name PUR NTI				
6	Amount (\$) \$13.19	7 Payee address; City; State; Zip Code 410 HWY 290 E. ELGIN, TX 78621				
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date 10/15/2024	Payee name PUR SHELL SERVICE S				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$11.86	ELGIN, TX 78621				
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	10/15/2024	PUR USPS PO				
	Amount (\$) \$1,176.00	Payee address; City; State; Zip Code 823 CONGRESS AVE				
		AUSTIN, TX 78722				
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)			
	Sch: 17/18 Rpt: 72/78	Venable, Desiree M.	00088377			
4	Date	5 Payee name				
	10/15/2024	PUR WALMART				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$28.98	1320 Hwy 290 Frontage Rd				
		ELGIN, TX 78621				
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	10/15/2024	PUR WM SUPERCENTER				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$29.70	488 State Hwy 71				
		BASTROP, TX 78602				
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense			
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	10/23/2024	RETURN TO SENDER PAC DONATION				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$500.00	695 Private Road 4035				
		Soemrville, TX 77879				
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			

POLITICAL EXPENDITURES FROM POLITICAL	
CONTRIBUTIONS	

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense y - Gift/Awards/Memorials Expense Printing Expense al Committee Legal Services Salaries/Wages/Contract Labor			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:			3	Filer ID	(Ethics Commission Filers)	
-	Sch: 18/18 Rpt: 73/78	Venable, Desiree M.			00088377		
4	Date	5 Payee name					
-	10/26/2024	TST CAFFE					
6	Amount (\$) \$10.39	7 Payee address; City; State; Zip Code 710 chestnut st					
	\$10.39	710 chesthut st					
		Bastrop, TX 78602					
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			de of Toylog, Com	plata Cabadula T	
	EXPENDITURE				officeholder living	plete Schedule T.	
		FOOD	i Ausun,	17,		J expense	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought			Office he	əld	
	Date	Payee name					
	10/26/2024	WHATABURGER					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$17.41	401 State hwy 71					
	+==						
		Bastrop, TX 78602					
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	EXPENDITURE					plete Schedule T.	
			f Austin,	IX,	officeholder living	j expense	
		EVENT					
					0.4%	- 1-1	
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought			Office he	910	

	UNPAID INCU	RRED OBLIGATION	NS	SCHEDULE F2
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expen - Gift/Awards/Memorials I Committee Legal Services		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F2: Sch: 1/5 Rpt: 74/78	2 FILER NAME Venable, Desiree M.		3 Filer ID (Ethics Commission Filers) 00088377
4	TOTAL OF UNITEMIZ	ZED UNPAID INCURRED O	BLIGATIONS	\$
	Date 10/04/2024	6 Payee name BANTHAN, NATHAN		
7	Amount (\$) \$990.00	 8 Payee address; City; 169 Kaanapali Lane 	State; Zip Code	
9	TYPE OF EXPENDITURE	Bastrop, TX 78602	Non-Political	
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at t Event Expense	Check if trave	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense
11	Complete <u>ONLY</u> if direct expenditure to benefit C/O	I Candidate/Officeholder name H	Office sought	Office held
	Date 10/13/2024	Payee name CURTIS, RICHARD		
	Amount (\$) \$369.00	Payee address; City; 202 Childers Dr. Apt. 1223	State; Zip Code	
		Bastrop, TX 78602		
	TYPE OF EXPENDITURE	X Political	Non-Political	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at t Consulting Expense	Check if trave	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held

	UNPAID INCU	RRED OBLIGATIONS			SCHEDULE F2
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Loan Re Office Ov Polling E Se Printing I Salaries/	payment/Reimbursement verhead/Rental Expense xpense Expense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F2: Sch: 2/5 Rpt: 75/78	2 FILER NAME Venable, Desiree M.			3 Filer ID (Ethics Commission Filers) 00088377
4	TOTAL OF UNITEMIZ	ZED UNPAID INCURRED OBLIC	GATIONS		\$
5	Date 10/17/2024	6 Payee name GARCIA, GRACIE			
7	Amount (\$) \$43.80	 8 Payee address; City; 104 Kimberly Dr. Stephenville, TX 76401 	State; Zip C	ode	
9	TYPE OF EXPENDITURE	X Political	Non-Po	litical	
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Salaries/Wages/Contract Labor	of this schedule)		l outside of Texas. Complete Schedule T. n, TX, officeholder living expense
11	Complete <u>ONLY</u> if direct expenditure to benefit C/O	l Candidate/Officeholder name H	Office so	l ught	Office held
	Date 10/13/2024	Payee name MORGAN, TJ			
	Amount (\$) \$43.00	Payee address; City; 121 Meadowood Dr.	State; Zip C	ode	
		Bastrop, TX 78602			
	TYPE OF EXPENDITURE	X Political	Non-Po	1	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Food/Beverage Expense	f this schedule)		l outside of Texas. Complete Schedule T. n, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office so	ught	Office held

	UNPAID INCU	RRED OBLIGATIONS		SCHEDULE F2
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Fees Office C Food/Beverage Expense Polling Gift/Awards/Memorials Expense Printing	epayment/Reimbursement Overhead/Rental Expense Expense Expense s/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F2: Sch: 3/5 Rpt: 76/78	2 FILER NAME Venable, Desiree M.		3 Filer ID (Ethics Commission Filers) 00088377
4	TOTAL OF UNITEMIZ	ZED UNPAID INCURRED OBLIGATIONS		\$
5	Date 10/16/2024	6 Payee name MORGAN, TJ		•
7	Amount (\$) \$43.00	 8 Payee address; City; State; Zip 0 121 Meadowood Dr. Bastrop, TX 78602 	Code	
9	TYPE OF EXPENDITURE	X Political Non-Po	olitical	
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense		outside of Texas. Complete Schedule T. n, TX, officeholder living expense
11	. Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office so	bught	Office held
	Date 10/24/2024	Payee name MORGAN, TJ		
	Amount (\$) \$17.90	Payee address; City; State; Zip (121 Meadowood Dr.	Code	
		Bastrop, TX 78602		
	TYPE OF EXPENDITURE	X Political Non-Po	olitical	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense		outside of Texas. Complete Schedule T. n, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office so	bught	Office held

UNPAID INCU	RRED OBLIGATIO	NS		SCHEDULE F2
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made E Candidate/Officeholder/Politic	Event Expense Fees Food/Beverage Expe dy - Gift/Awards/Memoria al Committee Legal Services	ense Offi als Expense Prir Sal	FOR BOX 10(a) In Repayment/Reimbursement ce Overhead/Rental Expense inig Expense aries/Wages/Contract Labor to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F2: Sch: 4/5 Rpt: 77/78	2 FILER NAME Venable, Desiree M.			3 Filer ID (Ethics Commission Filers) 00088377
⁴ TOTAL OF UNITEMI	ZED UNPAID INCURRED	OBLIGATIONS	i	\$
5 Date 10/23/2024	6 Payee name MORGAN			
7 Amount (\$) \$53.76	8 Payee address; City; 121 Meadowood Dr. Bastrop, TX 78602	State; Zi	p Code	
9 TYPE OF EXPENDITURE	X Political	Nor	n-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed a Event Expense	at the top of this schedule	Check if trave	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense
11 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name OH	Office	e sought	Office held
Date 10/12/2024	Payee name VENABLE, DESIREE			
Amount (\$) \$59.53	Payee address; City; 121 Meadowood Dr.	State; Zi	p Code	
TYPE OF EXPENDITURE	Bastrop, TX 78602	Nor	n-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed a Printing Expense	at the top of this schedule	Check if trave	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name	Office	e sought	Office held
Forms provided by Texas E	Thios Commission	www.ethics.state	ty up	Version V4.1.0.48da51f7

	RRED OBLIGATIONS	5		SCHE	DULE F2	
	EXPENDITURE (OR BOX 10(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense y - Gift/Awards/Memorials Exp	Loan Re Office O Polling E pense Printing I Salaries/	payment/Reimbursement verhead/Rental Expense Expense Expense Wages/Contract Labor	Solicitation/Fundraising Exper Transportation Equipment & F Travel in District Travel Out of District OTHER (enter a category not	elated Expense	
1 Total pages Schedule F2:	2 FILER NAME			3 Filer ID (Ethics Co	ommission Filers)	
Sch: 5/5 Rpt: 78/78	Venable, Desiree M.			00088377		
⁴ TOTAL OF UNITEMI	ZED UNPAID INCURRED OBL	IGATIONS		\$		
5 Date	6 Payee name					
10/26/2024	VENABLE, DESIREE					
7 Amount (\$)	8 Payee address; City;	State; Zip C	ode			
\$1,005.00	121 Meadowood Dr.					
	Bastrop, TX 78602					
9 TYPE OF EXPENDITURE	X Political	Non-Po	litical			
10 PURPOSE	(a) Category (See Categories listed at the to	op of this schedule)	(b) Description			
OF EXPENDITURE	Travel In District			outside of Texas. Complete Schedu	e T.	
				, TX, officeholder living expense		
			TRAVELIN			
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name	Office so	ught	Office held		