FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00015622 3 COMMITTEE NAME **OFFICE USE ONLY** Texas Optometric PAC Date Received **ELECTRONICALLY FILED** 12/04/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 3011 N. Lamar Ste 300 Change of Address Austin, TX 78705 Date Hand-delivered or Date Postmarked MS / MRS / MR **FIRST CAMPAIGN** MI **TREASURER** Receipt # Amount Ms. Brenda J. NAME Date Processed NICKNAME **SUFFIX** LAST BJ Date Imaged Avery CAMPAIGN APT / SUITE #; STREET ADDRESS (NO PO BOX PLEASE); CITY; STATE; ZIP CODE **TREASURER** 3011 N. Lamar STREET **ADDRESS** Ste 300 (Residence or Business) Austin, TX 78705 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** MAILING **ADDRESS** Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (512) 707-2020 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 10/26/2024 11/25/2024 **GO TO PAGE 2**

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Texas Optometric PA	С		00015622	
14 COMMITTEE	1. Candidates	A. Supported		
ACTIVITY	(Identify by name or, if applicable, classify by party.)			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures	A. Supported		
	(Describe by date and location of election and nature of issue.)	уч. Зарропеа		
		B. Opposed		
	3. Officeholders Assisted			
	(Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA		\$	32,986.72
EXPENDITURE TOTALS	3. TOTAL UNITEMIZEI	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	247,406.16
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT	<u>'</u>		<u> </u>	
		I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code.	rjury, that the a	accompanying report is d to be reported by me
		Ms. Breno	da J. Avery	
		Signature of Car	mpaign Treasu	ırer
AFFIX NOTAF	RY STAMP / SEAL ABOVE			
Sworn to and subscribe	ed before me, by the said _	, th	nis the	day
of	, 20, to certify	which, witness my hand and seal of office.		
Signature of officer a	administering oath	Printed name of officer administering oath	Title of office	cer administering oath

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

					3 of 69
17 CO	MMITTE	EE NAME	18 Filer ID	(Ethics Commissio	n Filers)
Tex	kas Op	tometric PAC	00015622		ŕ
		E SUBTOTALS		1	
l		SCHEDULE		SUBTOTAL A	AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	32,986.72
					, ,
,	\Box	SCHEDULE 42: MONI MONETARY (IN VIND) DOLITICAL CONTRIBUTIONS			
2.	Ш	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	Ш	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	ıK	\$	
5.	П	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA	ATION OR	\$	
	<u> </u>	LABOR ORGANIZATION			
	\Box	COLIEDURE CO. MONETARY CURRORT FROM CORRORATION OF LABOR ORC	ANIIZATIONI		
6.	Ш	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR			
7.	Ш	ORGANIZATION		\$	
8.	П	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	 \$	
				<u> </u>	
9.		SCHEDULE E: LOANS		\$	
	ш	CONEDULE E. EO/MO		 	
10		COLUMN FAL POLITICAL EVEN NOTICE COM POLITICAL CONTRIBUTION	2		
10.	Ш	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	5	\$	
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.	П	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		6	
15.	Ш	SCHEDOLET 4. EXPENDITORES WADE BY CREDIT CARD		\$	
14.	X	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	8,914.65
		COLUMN 1/2 INTERPRET OREDITO CAND REFUNDS AND CONTRIBUTIONS	DETUDNED		
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	
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I					

	MONET	ARY POLITICAL CONTRIBU	TIONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete th	nis form.	1	Total pages Schedule A1: Sch: 1/64 Rpt: 4/69	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$50.00
_		Helotes, TX 78023		Ţ		
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See Instruction:	is)		
	Date 11/15/2024	Full name of contributor out-of-state PAC Alexander O.D., Lindsey Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu	Sunnyvale, TX 75182 pation / Job title (See Instructions)	Employer (See Instruction	<u> </u> ns)		
	Optometrist	odion, oop the (See Handelons)	Employer (Gee mondeners)	13)		
	Date 11/15/2024	Full name of contributor out-of-state PAC Ali O.D., Mohsan Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$20.20
	D: : 1	Pearland, TX 77584		<u> </u>		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instruction	is)		
	Date 11/15/2024	Full name of contributor out-of-state PAC Allen O.D., Mark Contributor address; City; State; Zip Code Atlanta, TX 75551	(ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instruction	l is)		
	Date 11/15/2024	Full name of contributor out-of-state PAC Allison O.D., Joseph Contributor address; City; State; Zip Code Bryan, TX 77802	(ID#:)		Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instruction	is)		

	MONET	ARY POLITICAL CONTRIE	BUTION	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complet	te this for	m.	1	Total pages Schedule A1: Sch: 2/64 Rpt: 5/69	
2	FILER NAME Texas Optor	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor out-of-state out-of-state Amador O.D., Nancy Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$100.00
_		Leander, TX 78641	1-		_		
8	Principal occu Optometrist	pation / Job title (See Instructions)	9	Employer (See Instructions	s)		
	Date 11/15/2024	Amin O.D., Opal Contributor address; City; State; Zip Code	PAC (ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu	Austin, TX 78730 pation / Job title (See Instructions)		Employer (See Instructions	 s)		
	Optometrist						
	Date 11/15/2024	Full name of contributor out-of-state I Amin O.D., Opal Contributor address; City; State; Zip Code	PAC (ID#:)		Amount of Contribution (\$)	\$50.00
		Austin, TX 78730					
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state I Amir O.D., Nancy Contributor address; City; State; Zip Code San Antonio, TX 78240	-		•	Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state I Anderson O.D., Vanessa Contributor address; City; State; Zip Code Amarillo, TX 79109)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)		Employer (See Instructions	5)		
			,				

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 3/64 Rpt: 6/69	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$200.00
_		Fort Worth, TX 76008		_		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Arora O.D., Rajan Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occu	Dallas, TX 75227 pation / Job title (See Instructions)	Employer (See Instructions	;) 		
	Optometrist	odition 7 Job title (See Instructions)	Employer (See instructions	"		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Arya O.D., Dimple Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
		Sugar Land, TX 77479				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Aston II O.D., William Contributor address; City; State; Zip Code Ft Worth, TX 76179)	•	Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_Ayidu-Omo O.D., Evelyn Contributor address; City; State; Zip Code Mansfield, TX 76063-9143			Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 4/64 Rpt: 7/69	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor out-of-state PAC (ID#:_Baker O.D., Catherine Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$50.00
_	Deignaignal	Conroe, TX 77301	O Frankrija (Casa krativijatio na	<u></u>		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Barajas O.D., Juan Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
	Dringing agg	Mission, TX 78572	Employer (See Instructions	·/		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Barajas O.D., Juan Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00
		Mission, TX 78572				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_Barber O.D., Matt Contributor address; City; State; Zip Code Ft. Worth, TX 76116-5525)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_Barnes O.D., Sophia Contributor address; City; State; Zip Code Houston, TX 77056			Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 5/64 Rpt: 8/69	
2	FILER NAME Texas Optor			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$30.00
_	Deignaignal annu	Killeen, TX 76542	O Faralayar (Good Instructions			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Bashover O.D., Matthew Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
	Deinsinal assu	Arlington, TX 76011	Faralousy (Coolingtoustings)			
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Bate O.D., Joy Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00
		Haslet, TX 76052				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Bernay O.D., Deborah Contributor address; City; State; Zip Code La Porte, TX 77571			Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_Bhaga O.D., Sheetal Contributor address; City; State; Zip Code Frisco, TX 75036			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUT	TONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete thi	s form.	1	Total pages Schedule A1: Sch: 6/64 Rpt: 9/69	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor out-of-state PAC (II Bock O.D., Matthew Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$20.20
_		Houston, TX 77063	<u></u>			
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	is)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (II Brending O.D., Gabrielle Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$5.00
	Principal occu	Seabrook, TX 77586 pation / Job title (See Instructions)	Employer (See Instructions			
	Optometrist	oalion / Job title (See Instructions)	Employer (See Instructions	15)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (II Brinegar O.D., Vaughn Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$20.20
		Cedar Park, TX 78613				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	ıs)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (II Brochetti O.D., Brenda Contributor address; City; State; Zip Code Plano, TX 75075	D#:)		Amount of Contribution (\$)	\$20.20
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	l IS)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (II Brown O.D., Corwin Contributor address; City; State; Zip Code Cleburne, TX 76003			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	ıs)		
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	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 7/64 Rpt: 10/69	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$400.00
0	Dringing occu	Galveston, TX 77550 pation / Job title (See Instructions)	Employer /See Instructions			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Bui O.D., Thoai Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
		Carrollton, TX 75007				
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_Bullard O.D., Heath Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
		Cleburne, TX 76033				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Burket O.D., Caitlin Contributor address; City; State; Zip Code Harlingen, TX 78552)		Amount of Contribution (\$)	\$5.20
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Butler O.D., W Contributor address; City; State; Zip Code Round Rock, TX 78681			Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRII	BUTION	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how to comple	te this for	m.	1	Total pages Schedule A1: Sch: 8/64 Rpt: 11/69	
2	FILER NAME Texas Optor	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor out-of-state	PAC (ID#:)	7	Amount of Contribution (\$)	\$26.00
_		Celina, TX 75009					
8	Principal occu Optometrist	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 11/15/2024	Cargo O.D., Jon	PAC (ID#:			Amount of Contribution (\$)	\$200.00
	Principal occu	Irving, TX 75063 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Optometrist				,		
	Date 11/15/2024	Full name of contributor out-of-state Castleberry O.D., Kim Contributor address; City; State; Zip Code	PAC (ID#:)		Amount of Contribution (\$)	\$400.00
		Plano, TX 75024					
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/15/2024	Catuncan O.D., Jennifer	PAC (ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state Celico O.D., Brian Contributor address; City; State; Zip Code Dallas, TX 75231				Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	oation / Job title (See Instructions)		Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIE	BUTIONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complet	te this form.		1 Total pages Schedule A1: Sch: 9/64 Rpt: 12/69	
2	FILER NAME Texas Optor	netric PAC			3 Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor out-of-state Cerda O.D., Juan Contributor address; City; State; Zip Code 			7 Amount of Contribution (\$)	\$400.00
_		McAllen, TX 78501				
8	Optometrist	pation / Job title (See Instructions)	9 Emp	loyer (See Instructions)		
	Date 11/15/2024	Chang O.D., Sarah	PAC (ID#:		Amount of Contribution (\$)	\$52.00
	Principal occu	Houston, TX 77080 pation / Job title (See Instructions)	Fmp	loyer (See Instructions)		
	Optometrist		,			
	Date 11/15/2024	Full name of contributor out-of-state Chen O.D., Alexander Contributor address; City; State; Zip Code	PAC (ID#:)	Amount of Contribution (\$)	\$100.00
		Houston, TX 77004				
	Principal occu Optometrist	pation / Job title (See Instructions)	Emp	loyer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state Chen O.D., Elaine Contributor address; City; State; Zip Code HUMBLE, TX 77396	PAC (ID#:		Amount of Contribution (\$)	\$5.20
	Principal occu Optometrist	pation / Job title (See Instructions)	Emp	loyer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state Cherry O.D., Brian Contributor address; City; State; Zip Code Ft Worth, TX 76137	PAC (ID#:		Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Emp	loyer (See Instructions)		
			<u>'</u>			

	MONET	ARY POLITICAL CONTRIBUT	ΓIONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete th	is form.	1	Total pages Schedule A1: Sch: 10/64 Rpt: 13/69	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$200.00
_		Granbury, TX 76049		Ļ		
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	is)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (Cheyne O.D., Chris Contributor address; City; State; Zip Code	ID#:)		Amount of Contribution (\$)	\$200.00
	Principal occu	Granbury, TX 76049 pation / Job title (See Instructions)	Employer (See Instructions) 		
	Optometrist	outon, and the face instructions)	Employer (See Instructions	13)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (Chu O.D., Victoria Contributor address; City; State; Zip Code	ID#:)		Amount of Contribution (\$)	\$52.00
		Austin, TX 78745				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (Cobb O.D., James Contributor address; City; State; Zip Code Amarillo, TX 79107	ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	ıs)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (Colston O.D., Ben Contributor address; City; State; Zip Code Arlington, TX 76013	ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	ıs)		
			•			

	MONET	ARY POLITICAL CONTRIB	UTIONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete	e this form.	1	Total pages Schedule A1: Sch: 11/64 Rpt: 14/69	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor			Amount of Contribution (\$)	\$200.00
		Lubbock, TX 79424-0822				
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employe	r (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state F Conley O.D., Alex Contributor address; City; State; Zip Code	AC (ID#:		Amount of Contribution (\$)	\$50.00
		Fort Worth, TX 76131				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employe	r (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state F Conroy O.D., Scott Contributor address; City; State; Zip Code	AC (ID#:		Amount of Contribution (\$)	\$100.00
		Pasadena, TX 77505	1	(2 1 1 1 1		
	Optometrist	pation / Job title (See Instructions)	Employe	r (See Instructions)		
	Date 11/15/2024	Contributor address; City; State; Zip Code	AC (ID#:		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	Dallas, TX 75252 pation / Job title (See Instructions)	Employe	r (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state F Contaldi O.D., Mario Contributor address; City; State; Zip Code N. Richland Hills, TX 76180	AC (ID#:)	Amount of Contribution (\$)	\$104.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employe	r (See Instructions)		
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	MONET	ARY POLITICAL CONTRIBUT	IONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 12/64 Rpt: 15/69	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$200.00
_		Amarillo, TX 79109	1	L		
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID Correale O.D., Suzanne Contributor address; City; State; Zip Code Alvin, TX 77511	#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID Cowan O.D., Steve Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	Amarillo, TX 79109 Dation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 11/15/2024	Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	Atlanta, TX 75551 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID Crosier O.D., Russell Contributor address; City; State; Zip Code Arlington, TX 76018-1558			Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)		
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	MONET	ARY POLITICAL CONTI	RIBUTIONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to com	plete this form.	1	Total pages Schedule A1: Sch: 13/64 Rpt: 16/69	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor out-of-s Culbertson O.D., Wayne Contributor address; City; State; Zip Co 		7	Amount of Contribution (\$)	\$50.00
		Dallas, TX 75225				
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See Instruction	ıs)		
	Date 11/15/2024	Full name of contributor out-of-s Cummings O.D., Kory Contributor address; City; State; Zip Co	ode		Amount of Contribution (\$)	\$50.00
		Fort Worth, TX 76107		Ĺ		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instruction	IS)		
	Date 11/15/2024	Full name of contributor out-of-s Dabney O.D., Brandon Contributor address; City; State; Zip Co	ode		Amount of Contribution (\$)	\$100.00
		Amarillo, TX 79102				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instruction	ıs)		
	Date 11/15/2024	Dang O.D., Dana	ode		Amount of Contribution (\$)	\$500.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instruction	ıs)		
	Date 11/15/2024	Full name of contributor out-of-standard out-o	ode		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instruction	ıs)		
			· ·			

	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 14/64 Rpt: 17/69	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$20.00
_	Deire die alle access	Pearland, TX 77584	To Furthern (Contraction	<u> </u>		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	Date 11/15/2024	Full name of contributor	:)	•	Amount of Contribution (\$)	\$200.00
	Deinsinal assu	San Angelo, TX 76904	Franksian (Cook Instructions	Ţ		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID# Davis O.D., Mark Contributor address; City; State; Zip Code	<u>: </u>	•	Amount of Contribution (\$)	\$100.00
		San Antonio, TX 78259				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID# Dawn O.D., Rakich Contributor address; City; State; Zip Code San Antonio, TX 78215	t:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#Day, Jr O.D., Bob Contributor address; City; State; Zip Code Garland, TX 75041			Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
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	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 15/64 Rpt: 18/69	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$100.00
_		Dallas, TX 75219		_		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ DeMaggio O.D., Julie Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.20
	Deinsinal	Mansfield, TX 76063	Frankrije (Ozakasti oza	$\overline{\Gamma}$		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#: DeShaw O.D., Jonathan Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00
		Garland, TX 75042				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#: Deakins O.D., Jennifer Contributor address; City; State; Zip Code Fort Worth, TX 76135			Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
		1				

	MONET	ARY POLITICAL CONTRIBUT	TONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete thi	s form.	1	Total pages Schedule A1: Sch: 16/64 Rpt: 19/69	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor out-of-state PAC (II Delk O.D., Kyle Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$25.00
_	Deinsinal assu	Port Neches, TX 77651	O Familia var (Can Instructional	<u></u>		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (II Dennis O.D., Keith Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$100.00
	Principal occu	Round Rock, TX 78664 pation / Job title (See Instructions)	Employer (See Instructions	e)		
	Optometrist	oddon 7 oob dde (oee moddedono)	Employer (See Managaria	3)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (II Diaz O.D., Yvonne Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$100.00
		Edinburg, TX 78541				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (II Dinh O.D., David Contributor address; City; State; Zip Code Dallas, TX 75206	D#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (II Dolce O.D., Jackson Contributor address; City; State; Zip Code Port Neches, TX 77651			Amount of Contribution (\$)	\$5.20
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)		
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	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 17/64 Rpt: 20/69	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$200.00
_	Deinsinal assu	Lumberton, TX 77657	O Francisco (Con Instructions	<u></u>		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#: Duong O.D., Nghiem Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$75.00
	Dringing agg	Richardson, TX 75080	Employer (Coo Instructions	<u></u>		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#: Ellis O.D., John Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
		El Paso, TX 79902				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#: Ermis O.D., Keith Contributor address; City; State; Zip Code Wharton, TX 77488)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#: Everett O.D., Serena Contributor address; City; State; Zip Code Pearland, TX 77581-8850		•	Amount of Contribution (\$)	\$10.40
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 18/64 Rpt: 21/69	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$200.00
_		Allen, TX 75002	1			
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 11/15/2024	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	Allen, TX 75002 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)		
	Optometrist	,				
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID# Ezzell O.D., Steven Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$52.00
		Abilene, TX 79601				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID# Fandry O.D., Ellen Contributor address; City; State; Zip Code seabrook, TX 77586)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID# Farooque O.D., Naveera Contributor address; City; State; Zip Code Cypress, TX 77429			Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
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	MONET	ARY POLITICAL CONTRIBU	TIONS		SCHEDUI	E A1
	The Instru	ction Guide explains how to complete th	nis form.	1	Total pages Schedule A1: Sch: 19/64 Rpt: 22/69	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	on Filers)
4	Date 11/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$20.20
		Huntingtown, MD 20639				
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	ıs)		
	Date 11/15/2024	Full name of contributor out-of-state PAC Fitch O.D., James Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Amarillo, TX 79119 pation / Job title (See Instructions)	Employer (See Instructions	(2)		
	Optometrist	odion, con the (occ mandelons)	Employer (See mondents)			
	Date 11/15/2024	Full name of contributor out-of-state PAC of Fleitman O.D., Cynthia Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$100.00
		Gainesville, TX 76240	<u> </u>			
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	ıs)		
	Date 11/15/2024	Full name of contributor out-of-state PAC Flores O.D., Amador Contributor address; City; State; Zip Code Laredo, TX 78041	(ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	ıs)		
	Date 11/15/2024	Full name of contributor out-of-state PAC Fortenberry O.D., Sandra Contributor address; City; State; Zip Code Helotes, TX 78023	(ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	ıs)		
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	MONET	ARY POLITICAL CONTRIB	UTION	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete	this for	m.	1	Total pages Schedule A1: Sch: 20/64 Rpt: 23/69	
2	FILER NAME Texas Optor	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor out-of-state Proster O.D., Terry Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$200.00
_	5	Atlanta, TX 75551-3425	la.		<u></u>		
8	Optometrist	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state Page Gamini O.D., Safi Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$200.00
	Principal occu	Plano, TX 75093 pation / Job title (See Instructions)	<u> </u>	Employer (See Instructions	-, 		
	Optometrist	oution / Job title (See Instructions)		Employer (See instructions	')		
	Date 11/15/2024	Full name of contributor out-of-state Pagamini O.D., Safi Contributor address; City; State; Zip Code	AC (ID#:			Amount of Contribution (\$)	\$20.20
		Plano, TX 75093					
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state Page Garcia O.D., Claudia Contributor address; City; State; Zip Code Houston, TX 77081)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 11/15/2024	Full name of contributor out-of-state Pagarza O.D., Janet Contributor address; City; State; Zip Code Houston, TX 77064)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	oation / Job title (See Instructions)		Employer (See Instructions	s)		
			l				

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 21/64 Rpt: 24/69	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor out-of-state PAC (ID#: out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$400.00
_	<u> </u>	Missouri City, TX 77459				
8	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#: Glenn O.D., Erina Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$10.40
		Burleson, TX 76028-3749				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#: Graham Hayter O.D., Paul Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$200.00
		Irving, TX 75063				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#: Gray O.D., David Contributor address; City; State; Zip Code Midland, TX 79705)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#: Gray O.D., Jeannie Contributor address; City; State; Zip Code Midland, TX 79705			Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
		<u>'</u>				

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 22/64 Rpt: 25/69	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor out-of-state PAC (ID#:_ Greeman III O.D., Nelson Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$100.00
_		San Antonio, TX 78212				
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	i)		
	Date 11/15/2024	Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00
	Principal occu	San Antonio, TX 78212 pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Optometrist					
	Date 11/15/2024	Full name of contributor			Amount of Contribution (\$)	\$100.00
		Woodway, TX 76712				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Greene O.D., Matthew Contributor address; City; State; Zip Code College Station, TX 77845			Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Greenstein O.D., Karena Contributor address; City; State; Zip Code Dallas, TX 75216)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	i)		

	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 23/64 Rpt: 26/69	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor out-of-state PAC (ID: Hall O.D., Jamie Contributor address; City; State; Zip Code 	·	7	Amount of Contribution (\$)	\$20.20
_		Wills Point, TX 75169	Ja = 1 (0 1 1 1	Ĺ		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID: Hammond O.D., Eric Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$100.00
	Dringing agg	Austin, TX 78750	Employer (See Instructions	<u></u>		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID: Hanson O.D., Mark Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$100.00
		Arlington, TX 76012				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID: Hart O.D., Peggy Contributor address; City; State; Zip Code Houston, TX 77079	#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID: Harvey O.D., Cameo Contributor address; City; State; Zip Code Abilene, TX 79605	#:)		Amount of Contribution (\$)	\$20.20
	Principal occu Accountant	pation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 24/64 Rpt: 27/69	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$100.00
_		Mineola, TX 75773	1	_		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Hawkins O.D., Heidi Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
	Principal occu	Amarillo, TX 79109 pation / Job title (See Instructions)	Employer (See Instructions	:) 		
	Optometrist	oduon 7 oob uuc (occ mandenons)	Employer (See manucuona	')		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Heeg O.D., Paul Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
		Coppell, TX 75019				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Hejny O.D., Whitney Contributor address; City; State; Zip Code Miles, TX 76861			Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_Helbert-Green O.D., Carolyn Contributor address; City; State; Zip Code Colleyville, TX 76034			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1	
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 25/64 Rpt: 28/69	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	on Filers)
4	Date 11/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$100.00
_	Dringing! aggs	Victoria, TX 77904	0 Employer (See Instructions	_		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 11/15/2024	Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00
	Principal occu	Katy, TX 77494 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Optometrist	,	. , ,	,		
	Date 11/15/2024	Full name of contributor)		Amount of Contribution (\$)	\$50.00
		Katy, TX 77494				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_Hull O.D., Henry Contributor address; City; State; Zip Code New Braunfels, TX 78130			Amount of Contribution (\$)	\$2,000.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Hutchins O.D., Jaclyn Contributor address; City; State; Zip Code San Antonio, TX 78257)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	()		

	MONET	ARY POLITICAL CONT	RIBUTION	S		SCHEDUL	E A1
	The Instru	ction Guide explains how to com	nplete this form	n.	1	Total pages Schedule A1: Sch: 26/64 Rpt: 29/69	
2	FILER NAME Texas Optor	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor out-of Huynh O.D., Hieu Contributor address; City; State; Zip C)	7	Amount of Contribution (\$)	\$50.00
_	5	Dallas, TX 75240	- la				
8	Optometrist	pation / Job title (See Instructions)	9	Employer (See Instructions	;)		
	Date 11/15/2024	Johle O.D., Sarah	-state PAC (ID#:)		Amount of Contribution (\$)	\$50.00
	Dringing agg	Hutto, TX 78634		Employer (Con Instructions	_		
	Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of Johnson O.D., Murray Contributor address; City; State; Zip C	-state PAC (ID#:			Amount of Contribution (\$)	\$400.00
		Dallas, TX 75287					
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	i)		
	Date 11/15/2024	Jolivette O.D., Nia	e-state PAC (ID#:)		Amount of Contribution (\$)	\$25.00
	Principal occu Optometrist	oation / Job title (See Instructions)		Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of Jones O.D., Jeffrey Contributor address; City; State; Zip C	-state PAC (ID#:			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)		Employer (See Instructions	i)		
			1				

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 27/64 Rpt: 30/69	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$50.00
_	5	Austin, TX 78746		<u></u>		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 11/15/2024	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	Arlington, TX 76005 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)		
	Optometrist	, ,	. , (
	Date 11/15/2024	Full name of contributor			Amount of Contribution (\$)	\$20.80
		Houston, TX 77047-6771				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_Kemp O.D., Robert Contributor address; City; State; Zip Code Houston, TX 77015-2310			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_Kim O.D., Ronnie Contributor address; City; State; Zip Code Fort Worth, TX 76137-4483			Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 28/64 Rpt: 31/69	
2	FILER NAME Texas Optor			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	5 Full name of contributor out-of-state PAC (ID#:_ King O.D., Kenneth 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$200.00
•	Dringing occu	Fort Worth, TX 76244	Employer /See Instructions			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ King O.D., Kenneth Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Deire size al. a servi	Fort Worth, TX 76244	Faralassa (Caralastastica)			
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor)		Amount of Contribution (\$)	\$100.00
		Plano, TX 75093				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Kocian O.D., Larry Contributor address; City; State; Zip Code Harker Heights, TX 76548)		Amount of Contribution (\$)	\$104.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Kodukula O.D., Dipa Contributor address; City; State; Zip Code Austin, TX 78717			Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1	
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 29/64 Rpt: 32/69	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$20.20
_	Deire die alle access	Carrollton, TX 75007	O Familiana (Con la destruction	$\overline{\Gamma}$		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Kuykendall O.D., Traci Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
		Cleburne, TX 76033		<u></u>		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Lagunas O.D., Claudio Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$400.00
		The Woodlands, TX 77382				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_Lam O.D., Sean Contributor address; City; State; Zip Code Houston, TX 77075)		Amount of Contribution (\$)	\$20.20
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_Lambert O.D., Sawyer Contributor address; City; State; Zip Code Houston, TX 77008			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBU	JTIONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete	this form.	1	Total pages Schedule A1: Sch: 30/64 Rpt: 33/69	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$100.00
_	Duinning Langu	Witchita Falls, TX 76308	Lo Employer (Cookington)	tio		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instru	uctions)		
	Date 11/15/2024	Contributor address; City; State; Zip Code	C (ID#:	_)	Amount of Contribution (\$)	\$100.00
	Principal occu	Houston, TX 77072 pation / Job title (See Instructions)	Employer (See Instru	uctions)		
	Optometrist	(000)	,p.3,0. (0.00			
	Date 11/15/2024	Full name of contributor out-of-state PAG Le O.D., Hoan Contributor address; City; State; Zip Code	C (ID#:		Amount of Contribution (\$)	\$50.00
		Spring, TX 76135				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instru	uctions)		
	Date 11/15/2024	Full name of contributor out-of-state PAG Le O.D., Kevin Contributor address; City; State; Zip Code Houston, TX 77054	C (ID#:	_)	Amount of Contribution (\$)	\$5.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instru	uctions)		
	Date 11/15/2024	Full name of contributor out-of-state PAG Le O.D., Lisa Contributor address; City; State; Zip Code Missouri City, TX 77459	C (ID#:		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instru	uctions)		
			•			

	MONET	ARY POLITICAL CONTRI	BUTION	IS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to compl	ete this for	m.	1	Total pages Schedule A1: Sch: 31/64 Rpt: 34/69	
2	FILER NAME Texas Opton	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor out-of-stat Lemanski O.D., Sundra Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$100.00
		Austin, TX 78727					
8	Principal occu Optometrist	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 11/15/2024	Linh O.D., Linh Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00
	Principal occu	Leander, TX 78641 Dation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ;)		
	Optometrist						
	Date 11/15/2024	Full name of contributor out-of-stat Lollar O.D., Jay Contributor address; City; State; Zip Code	e PAC (ID#:)		Amount of Contribution (\$)	\$200.00
		Allen, TX 75013					
	Principal occu Optometrist	oation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/15/2024	Lou O.D., Oliver)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/15/2024	Mai O.D., Kelly				Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	oation / Job title (See Instructions)		Employer (See Instructions	s)		
			L				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 32/64 Rpt: 35/69	
2	FILER NAME Texas Optor			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	5 Full name of contributor out-of-state PAC (ID#:_ Maldonado O.D., Michael 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$50.00
_	Discipal	El Paso, TX 79902				
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_Maldonado O.D., Nicole Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
	Dringing age	San Antonio, TX 78249	Employer (Con Instructions			
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#: Martin O.D., Joe Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
		Cleburne, TX 76033				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Martin O.D., Michal Contributor address; City; State; Zip Code Austin, TX 78735)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Martinez O.D., Michelle Contributor address; City; State; Zip Code Ft. Worth, TX 76244			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 33/64 Rpt: 36/69	
2	FILER NAME Texas Optor			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$20.20
_	Deignaignal annu	Arlington, TX 76006	O Francis var (Cap Instructions			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Masters O.D., Trishna Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.20
	Deignaignal annu	Arlington, TX 76006	Familia ya (Can Instructiona			
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#: McCall O.D., Eric Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$200.00
		Texarkana, TX 75503				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ McCarty O.D., Dennis Contributor address; City; State; Zip Code Cedar Park, TX 78613			Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ McCarty O.D., Dennis Contributor address; City; State; Zip Code Cedar Park, TX 78613			Amount of Contribution (\$)	\$250.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 34/64 Rpt: 37/69	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$20.20
_		College Station, TX 77845	l			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	;)		
	Date 11/15/2024	Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00
	Principal occu	Austin, TX 78759 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Optometrist					
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_McCown O.D., Joshua Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
		Gatesville, TX 76528	.			
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_McDaniel O.D., Stephen Contributor address; City; State; Zip Code DallaS, TX 75208)		Amount of Contribution (\$)	\$104.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_McGowan O.D., Joseph Contributor address; City; State; Zip Code AUSTIN, TX 78748-1051			Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	i)		

	MONET	ARY POLITICAL CONTRIBU	JTIOI	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete	this fo	m.	1	Total pages Schedule A1: Sch: 35/64 Rpt: 38/69	
2	FILER NAME Texas Opton	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor out-of-state PA McPherson O.D., Kimberly Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$50.00
•	Dringinal occu	North Richland Hills, TX 76180	ا	Employer (See Instructions	·/-		
8	Optometrist	pation / Job title (See Instructions)	l ⁹	Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PA Means O.D., Stephen Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$400.00
	Dringinal occu	Huntsville, TX 77340		Employer (See Instructions	·/-		
	Optometrist	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PA Montgomery O.D., Brandi Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$50.00
		Missouri City, TX 77459					
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PA Moon O.D., Debra Contributor address; City; State; Zip Code Plano, TX 75024)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 11/15/2024	Full name of contributor out-of-state PA Moore O.D., Tory Contributor address; City; State; Zip Code Dumas, TX 79029				Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	s)		
			<u> </u>				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 36/64 Rpt: 39/69	
2	FILER NAME Texas Optor			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$50.00
_	Dringing Logg	Laredo, TX 78043	O Employer (See Instructions			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#: Morozco O.D., Michael Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
	Dringing occu	San Antonio, TX 78240	Employer (See Instructions			
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#: Mozdbar O.D., Sima Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$20.20
		Austin, TX 78750				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_Mundackal O.D., Joel Contributor address; City; State; Zip Code Plano, TX 75024)		Amount of Contribution (\$)	\$10.40
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Munson O.D., Kevin Contributor address; City; State; Zip Code Melissa, TX 75454)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CO	NTRIBUTION	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how to	complete this for	m.	1	Total pages Schedule A1: Sch: 37/64 Rpt: 40/69	
2	FILER NAME Texas Optor	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	5 Full name of contributor Murr O.D., Edwin6 Contributor address; City; State;)	7	Amount of Contribution (\$)	\$200.00
		Arlington, TX 76016-2069	1				
8	Principal occu Optometrist	pation / Job title (See Instructions)	9	Employer (See Instructions	i)		
	Date 11/15/2024	Full name of contributor Murrell O.D., Jessica Contributor address; City; State;	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$20.20
		Spring, TX 77002	т-				
	Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor Newman O.D., Clarke Contributor address; City; State;	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$400.00
		Dallas, TX 75201					
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	i)		
	Date 11/15/2024	Full name of contributor Newton O.D., Ronald Contributor address; City; State; Laredo, TX 78040				Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor Nguyen O.D., Hai Contributor address; City; State; Portland, TX 78374	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	i)		
			<u> </u>				

	MONET	ARY POLITICAL CONTRIBU	TIONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete th	his form.	1	Total pages Schedule A1: Sch: 38/64 Rpt: 41/69	
2	FILER NAME Texas Optor	netric PAC			Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor		7 A	Amount of Contribution (\$)	\$50.00
_		Addison, TX 75001				
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC Nguyen O.D., Kimuyen Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu	Richardson, TX 75082 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Optometrist		,, (===	,		
	Date 11/15/2024	Full name of contributor	· (ID#:)		Amount of Contribution (\$)	\$20.20
		Houston, TX 77059				
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC Nguyen O.D., Quan Contributor address; City; State; Zip Code Houston, TX 77072	· (ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC Nguyen O.D., Steve Contributor address; City; State; Zip Code Dallas, TX 75224	(ID#:)		Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	S)		
			,			

	MONET	ARY POLITICAL C	ONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 39/64 Rpt: 42/69	
2	FILER NAME Texas Optor	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	5 Full name of contributor Nguyen O.D., Thai-An6 Contributor address; City; St	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$100.00
_		Dallas, TX 75206			_		
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 11/15/2024	Full name of contributor Nguyen O.D., Tu Contributor address; City; St)		Amount of Contribution (\$)	\$50.00
		Cypress, TX 77429			_		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Date 11/15/2024	Full name of contributor Nguyen O.D., Vicki Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code		•	Amount of Contribution (\$)	\$50.00
		Grand Prairie, TX 75054					
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor O'Brien O.D., Lisa Contributor address; City; St. Amarillo, TX 79109			•	Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	pation / Job title (See Instructions		Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor O'Brien O.D., Lisa Contributor address; City; St	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 40/64 Rpt: 43/69			
2	FILER NAME Texas Optor			3	Filer ID (Ethics Commission 00015622	n Filers)		
4	Date 11/15/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$50.00		
_	Dringing Logg	Amarillo, TX 79109	D. Employer (See Instructions					
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions))				
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Ousley O.D., Bruce Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00		
	Principal occu	Highland Village, TX 75077 pation / Job title (See Instructions)	Employer (See Instructions					
	Optometrist	pation / 300 title (See Instructions)	Employer (See Instructions	,				
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Park O.D., Jon Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00		
		Irving, TX 75063						
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)				
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Pass O.D., Hulon Contributor address; City; State; Zip Code Fort Stockton, TX 79735)		Amount of Contribution (\$)	\$100.00		
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)				
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Pass O.D., Joshua Contributor address; City; State; Zip Code Fort Stockton, TX 79735)		Amount of Contribution (\$)	\$100.00		
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)				

	MONET	ARY POLITICAL CONTRIBUT	TIONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete thi	s form.	1	Total pages Schedule A1: Sch: 41/64 Rpt: 44/69	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$100.00
		Frisco, TX 75035				
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (II Patel O.D., Neha Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$50.00
	Dringing aggr	Fort Worth, TX 76137	Employer (Coo Instruction	<u></u>		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (II Patel O.D., Nimisha Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$20.20
		Houston, TX 77027				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (II Patel O.D., Riyal Contributor address; City; State; Zip Code Austin, TX 78704	D#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (If Patel O.D., Samir Contributor address; City; State; Zip Code Beaumont, TX 77706	D#:)		Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
			•			

	MONET	ARY POLITICAL CONTRIBUT	TIONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete thi	s form.	1	Total pages Schedule A1: Sch: 42/64 Rpt: 45/69	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor out-of-state PAC (II Patrick O.D., Carey Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$200.00
_		Allen, TX 75002		Ļ		
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (II Pena O.D., Benny Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$200.00
	Principal occu	Kerrville, TX 78028 pation / Job title (See Instructions)	Employer (See Instructions	(2		
	Optometrist	oddon 7 oob dde (oee maddellons)	Employer (See mondedons	٥,		
	Date 11/15/2024	Full name of contributor out-of-state PAC (II Peng O.D., Amanda Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$5.20
		New York, NY 10021				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (If Pepin O.D., Allison Contributor address; City; State; Zip Code Georgetown, TX 78628	D#:)		Amount of Contribution (\$)	\$52.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (II Peterson O.D., Christopher Contributor address; City; State; Zip Code Carrolton, TX 75006	D#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTI	RIBUTIONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to com	plete this form.	1	Total pages Schedule A1: Sch: 43/64 Rpt: 46/69	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commissio 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor out-of-peterson O.D., Savannah Contributor address; City; State; Zip Company 		7	Amount of Contribution (\$)	\$26.00
_		Webster, TX 77598	<u> </u>			
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See In	structions)		
	Date 11/15/2024	Full name of contributor out-of- Philip O.D., Blessy Contributor address; City; State; Zip Co	state PAC (ID#:		Amount of Contribution (\$)	\$20.00
		Coppell, TX 75019				
	Optometrist	pation / Job title (See Instructions)	Employer (See In	structions)		
	Date 11/15/2024	Full name of contributor out-of- Phillips O.D., Jeff Contributor address; City; State; Zip Co	state PAC (ID#:		Amount of Contribution (\$)	\$200.00
	Principal occu	Texarkana, TX 75503 pation / Job title (See Instructions)	Employer (See In	etructions)		
	Optometrist	odition 7 300 title (See Instituctions)	Employer (See III	3truction3)		
	Date 11/15/2024	Phillips O.D., Jeff	state PAC (ID#:		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See In	structions)		
	Date 11/15/2024	Pillai O.D., Anith	state PAC (ID#:		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See In	structions)		
			I			

	MONET	ARY POLITICAL CONTRIBU	TIONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete t	his form.	1	Total pages Schedule A1: Sch: 44/64 Rpt: 47/69	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor	,	7	Amount of Contribution (\$)	\$100.00
	Dringing Loon	Midlothian, TX 76065	Employer /Coo Instruction			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instruction:	is)		
	Date 11/15/2024	Full name of contributor out-of-state PAC Poole O.D., Mohan Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$100.00
	Dringing age	Marble Falls, TX 78654	Employer (Co.) Instruction	<u></u>		
	Optometrist	pation / Job title (See Instructions)	Employer (See Instruction:	is)		
	Date 11/15/2024	Full name of contributor out-of-state PAC Prapta O.D., Shawn Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$100.00
		Mansfield, TX 76063				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instruction:	is)		
	Date 11/15/2024	Full name of contributor out-of-state PAC Prati O.D., Martin Contributor address; City; State; Zip Code Houston, TX 77058	C (ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instruction	ns)		
	Date 11/15/2024	Full name of contributor out-of-state PAC Proske O.D., Paul Contributor address; City; State; Zip Code Spring, TX 77379	C (ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instruction	ns)		
			-			

	MONET	ARY POLITICAL CONTRIBUT	IONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete thi	s form.	1	Total pages Schedule A1: Sch: 45/64 Rpt: 48/69	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commissio 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor out-of-state PAC (II Proske O.D., Paul Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$50.00
_		Spring, TX 77379				
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (II Pulpan O.D., Stephanie Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$50.00
	Principal occu	Perryton, TX 79070 pation / Job title (See Instructions)	Employer (See Instructions	e)		
	Optometrist	Janoi 17 Job line (See Instructions)	Employer (See instructions	3)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (II Qattan O.D., Ibrahim Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$200.00
		Lewisville, TX 75067-5539				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (II Quinlivan O.D., Paige Contributor address; City; State; Zip Code Georgetown, TX 78628	D#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (II Ramirez O.D., Angie Contributor address; City; State; Zip Code Pharr, TX 78582	D#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 46/64 Rpt: 49/69	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$100.00
_	Dringing Logg	McAllen, TX 78504	O Employer (Con Instructions			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_Ramirez-Shank O.D., Diane Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00
		San Antonio, TX 78232				
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Ratcliff O.D., Reagan Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00
		Friendswood, TX 77546				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Reneau O.D., Aaron Contributor address; City; State; Zip Code Kingwood, TX 77345			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Reyes O.D., Martin Contributor address; City; State; Zip Code Richmond, TX 77407-2694)		Amount of Contribution (\$)	\$3.12
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 47/64 Rpt: 50/69	
2	FILER NAME Texas Optor			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor out-of-state PAC (ID#:_ Reynolds O.D., Samantha Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$52.00
_	Dringing Lagor	Haslet, TX 76052	O Franks or (Cas Instructions			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor			Amount of Contribution (\$)	\$10.00
	Principal occu	Pearland, TX 77584-8243 pation / Job title (See Instructions)	Employer (See Instructions			
	Optometrist	pation 7 300 title (See Instructions)	Employer (See Instructions	,		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Robertson O.D., Reid Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00
		Allen, TX 75013				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Robinson O.D., Beth Contributor address; City; State; Zip Code Friendswood, TX 77546			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Robinson O.D., Nathaniel Contributor address; City; State; Zip Code Lufkin, TX 75904)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUT	TONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete thi	s form.	1	Total pages Schedule A1: Sch: 48/64 Rpt: 51/69	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$50.00
_		Weslaco, TX 78596		Ĺ		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instruction:	is)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (II Rojas O.D., Luis Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$100.00
	Deinsinal assu	Dallas, TX 75204	Familia var (Coo landa vationali			
	Optometrist	pation / Job title (See Instructions)	Employer (See Instruction:	iS)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (II Rosemore O.D., Corey Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$20.20
		Frisco, TX 75035				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instruction	ıs)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (II Rosemore O.D., Ryan Contributor address; City; State; Zip Code Frisco, TX 75033	D#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instruction	ıs)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (II Salchak O.D., Robert Contributor address; City; State; Zip Code Sugarland, TX 77479	D#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instruction:	ıs)		
			,			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 49/64 Rpt: 52/69	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$26.00
		Houston, TX 77204-3069				
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	i)		
	Date 11/15/2024	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	Amarillo, TX 79119 pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID# Sawhney O.D., Dimple Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	Austin, TX 78723 pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID# Seabert O.D., William Contributor address; City; State; Zip Code Burleson, TX 76028	<u> </u>		Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID# Segu O.D., Pat Contributor address; City; State; Zip Code Missouri City, TX 77459			Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	i)		
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	MONET	ARY POLITICAL CON	TRIBUTIONS	5		SCHEDUL	E A1
	The Instru	ction Guide explains how to co	omplete this form		1	Total pages Schedule A1: Sch: 50/64 Rpt: 53/69	
2	FILER NAME Texas Optor	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	Segu O.D., Pat	t-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$52.00
		Missouri City, TX 77459	· ·				
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 6	Employer (See Instructions))		
	Date 11/15/2024	Full name of contributor out Shah O.D., Vidhi Contributor address; City; State; Zip	t-of-state PAC (ID#:)		Amount of Contribution (\$)	\$25.00
	Dringinal acqu	Irving, TX 75038-5010 pation / Job title (See Instructions)	1 .	Employer (See Instructions)			
	Optometrist	pation / Job title (See Instructions)		Employer (See Instructions)	,		
	Date 11/15/2024	Full name of contributor out Shandley O.D., Brian Contributor address; City; State; Zip	t-of-state PAC (ID#:)		Amount of Contribution (\$)	\$400.00
		Lake Jackson, TX 77566					
	Principal occu Optometrist	pation / Job title (See Instructions)	E	Employer (See Instructions))		
	Date 11/15/2024	Full name of contributor out Shannon O.D., Bridget Contributor address; City; State; Zip Frisco, TX 75035	t-of-state PAC (ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	E	Employer (See Instructions))		
	Date 11/15/2024	Shauger O.D., Susan	t-of-state PAC (ID#:			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	E	Employer (See Instructions))		
			l				

	MONET	ARY POLITICAL CONT	RIBUTIONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to cor	nplete this form.	1	Total pages Schedule A1: Sch: 51/64 Rpt: 54/69	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commissio 00015622	n Filers)
4	Date 11/15/2024	Shidlofsky O.D., Charles	f-state PAC (ID#:	7	Amount of Contribution (\$)	\$50.00
		Plano, TX 75024				
8	Principal occu Optometrist	oation / Job title (See Instructions)	9 Emplo	yer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-o Sianghio O.D., Leyden Contributor address; City; State; Zip 0	f-state PAC (ID#:		Amount of Contribution (\$)	\$20.20
	Principal occu	San Antonio, TX 78255 pation / Job title (See Instructions)	Emplo	yer (See Instructions)		
	Optometrist	(000)		, (
	Date 11/15/2024	Full name of contributor out-o Sitterle O.D., Scott Contributor address; City; State; Zip 0	f-state PAC (ID#: Code		Amount of Contribution (\$)	\$100.00
	Dringing agg	San Antonio, TX 78247	Emplo	ver (Cae Instructions)		
	Optometrist	pation / Job title (See Instructions)	Επιριο	yer (See Instructions)		
	Date 11/15/2024	Smith O.D., Cameron	f-state PAC (ID#:		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Emplo	yer (See Instructions)		
	Date 11/15/2024	Sorrenson O.D., Laurie	f-state PAC (ID#:		Amount of Contribution (\$)	\$500.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Emplo	yer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 52/64 Rpt: 55/69	
2	FILER NAME Texas Optor			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$100.00
_	<u> </u>	Uvalde, TX 78801				
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_Stalnaker O.D., Alex Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$5.20
	Deire size al. a servi	Houston, TX 77025	Faralassa (Caralastastica)			
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Staples O.D., Robert Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$200.00
		Wichita Falls, TX 76301-5020				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Stephens O.D., Nancy Contributor address; City; State; Zip Code Pearland, TX 77581)		Amount of Contribution (\$)	\$20.20
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_Steven O.D., Kurtin Contributor address; City; State; Zip Code Dallas, TX 75252			Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRI	BUTION	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how to comple	ete this for	m.	1	Total pages Schedule A1: Sch: 53/64 Rpt: 56/69	
2	FILER NAME Texas Optor	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	Strickland O.D., Clipper	e PAC (ID#:)	7	Amount of Contribution (\$)	\$20.20
_		Big Spring, TX 79720	1_				
8	Optometrist	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 11/15/2024	Strong O.D., Jane				Amount of Contribution (\$)	\$100.00
	Principal occu	Cypress, TX 77419 pation / Job title (See Instructions)		Employer (See Instructions			
	Optometrist	oauon / 300 uue (366 mauduuns)		Employer (See Instructions	')		
	Date 11/15/2024	Full name of contributor out-of-state Sturm O.D., Mark Contributor address; City; State; Zip Code	e PAC (ID#:)		Amount of Contribution (\$)	\$50.00
		Austin, TX 78749					
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	i)		
	Date 11/15/2024	Sullivan O.D., Mitchell				Amount of Contribution (\$)	\$5.00
	Principal occu Optometrist	oation / Job title (See Instructions)		Employer (See Instructions	()		
	Date 11/15/2024	Taylor O.D., Alicia				Amount of Contribution (\$)	\$5.00
	Principal occu Optometrist	oation / Job title (See Instructions)		Employer (See Instructions	i)		
			'				

	MONET	ARY POLITICAL CON	TRIBUTIONS		SCHEDULI	E A1
	The Instru	ction Guide explains how to co	mplete this form.	ı	Fotal pages Schedule A1: Sch: 54/64 Rpt: 57/69	
2	FILER NAME Texas Optor	netric PAC		I	Filer ID (Ethics Commission 00015622	ı Filers)
4	Date 11/15/2024	 5 Full name of contributor out- Taylor O.D., Erin 6 Contributor address; City; State; Zip 		7 /	Amount of Contribution (\$)	\$100.00
_		Amarillo, TX 79110				
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out- Terrell O.D., Jenny Contributor address; City; State; Zip	of-state PAC (ID#:) Code		Amount of Contribution (\$)	\$50.00
	Principal occu	Hurst, TX 76054 pation / Job title (See Instructions)	Employer (See Instructions	<u>s)</u>		
	Optometrist	scalon, con the (See Institutions)	Employer (See management)	<i>-</i>)		
	Date 11/15/2024	Full name of contributor out- Thames O.D., Lacey Contributor address; City; State; Zip	of-state PAC (ID#:) Code		Amount of Contribution (\$)	\$50.00
		Hutto, TX 78634				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out- Thomas O.D., Jack Contributor address; City; State; Zip Amarillo, TX 79109	of-state PAC (ID#:) Code		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/15/2024	Thomas O.D., Jeff	of-state PAC (ID#:) Code		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
			•			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 55/64 Rpt: 58/69	
2	FILER NAME Texas Optor			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$100.00
•	Dringing Logg	Amarillo, TX 79109	D. Employer (Co.) Instructions			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Thornton O.D., Kristofer Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
		Longview, TX 75605				
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Tilson O.D., Alan Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00
		Irving, TX 75038				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Tovias O.D., Mayra Contributor address; City; State; Zip Code Santa Fe, TX 77510)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Tran O.D., Anthony Contributor address; City; State; Zip Code Dallas, TX 75206			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 56/64 Rpt: 59/69	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$20.20
		Austin, TX 78759				
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID# Tran O.D., Joshua Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$5.20
	Principal occu	Richmond, TX 77407 pation / Job title (See Instructions)	Employer (See Instructions	?) 		
	Optometrist	oution / Job title (See mail delibris)	Employer (See instructions	"		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID# Tran O.D., Lori Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$200.00
		Plano, TX 75024				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID# Tran O.D., Toan Contributor address; City; State; Zip Code Carrollton, TX 75010	:)	•	Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID# Trichel O.D., Jessica Contributor address; City; State; Zip Code Texarkana, TX 75503			Amount of Contribution (\$)	\$20.20
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	s)		
			•			

	MONET	ARY POLITICAL CONTRII	BUTION	NS .		SCHEDUL	E A1
	The Instru	ction Guide explains how to comple	ete this for	m.	1	Total pages Schedule A1: Sch: 57/64 Rpt: 60/69	
2	FILER NAME Texas Optor	netric PAC			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor out-of-state Trinh O.D., Kim Contributor address; City; State; Zip Code 	PAC (ID#:)	7	Amount of Contribution (\$)	\$50.00
		Austin, TX 78728					
8	Principal occu Optometrist	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 11/15/2024	Tupa O.D., Faye	PAC (ID#:)		Amount of Contribution (\$)	\$50.00
		Ganado, TX 77962	1				
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state Turner O.D., Kimberly Contributor address; City; State; Zip Code	PAC (ID#:)		Amount of Contribution (\$)	\$100.00
	Deinsinal	San Antonio, TX 78258		Frankrije (O. a. kratinski ara	$\overline{\Gamma}$		
	Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/15/2024	Twa O.D., Michael	PAC (ID#:)		Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Date 11/15/2024	Full name of contributor out-of-state Tybor O.D., David Contributor address; City; State; Zip Code Austin, TX 78749)		Amount of Contribution (\$)	\$400.00
	Principal occu Optometrist	oation / Job title (See Instructions)		Employer (See Instructions	5)		
			L				

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE	E A1	
	The Instruc	ction Guide explains how to c	omplete this for	n.	1	Total pages Schedule A1: Sch: 58/64 Rpt: 61/69	
2	FILER NAME Texas Opton	netric PAC			3	Filer ID (Ethics Commission 00015622	Filers)
4	Date 11/15/2024	 Full name of contributor our Tybor O.D., John Contributor address; City; State; Zither)	7	Amount of Contribution (\$)	\$20.20
_	Deinsinal assu	Austin, TX 78746	lo.	Franksian (Caa Instructions			
8	Optometrist	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor ou Upchurch O.D., Alan Contributor address; City; State; Zi				Amount of Contribution (\$)	\$50.00
		McKinney, TX 75070					
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out	ut-of-state PAC (ID#: ip Code			Amount of Contribution (\$)	\$50.00
		Houston, TX 77077					
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor output of the contributor address; City; State; Zity; Palmview, TX 78572				Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Date 11/15/2024	Full name of contributor on Vaughn O.D., Jamel Contributor address; City; State; Zith	ut-of-state PAC (ID#: ip Code			Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			'				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 59/64 Rpt: 62/69	
2	FILER NAME Texas Optor	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$50.00
8	Principal occu	Corpus Christi, TX 78414 pation / Job title (See Instructions)	9 Employer (See Instructions	_		
0	Optometrist	oauon7 Job title (See Instructions)	Employer (See instructions	')		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Vorster O.D., Edward Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$400.00
		Silsbee, TX 77656	1 			
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Wagner O.D., Troy Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$200.00
		The Woodlands, TX 77382				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_Walters O.D., Mary Kate Contributor address; City; State; Zip Code Fort Worth, TX 76008			Amount of Contribution (\$)	\$104.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	()		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_Warstler O.D., Ashley Contributor address; City; State; Zip Code Houston, TX 77042			Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	·)		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this 1	orm.	1	Total pages Schedule A1: Sch: 60/64 Rpt: 63/69	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor	_	7	Amount of Contribution (\$)	\$200.00
	Dringing Loon	Spring, TX 77379	6 Employer (Coo Instructions	<u></u>		
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Wedel O.D., Karl Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
		Cleburne, TX 76033	T			
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Weedman O.D., Audrey Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
		New Braunfels, TX 78132				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Wei O.D., Deborah Contributor address; City; State; Zip Code Plano, TX 75024)		Amount of Contribution (\$)	\$52.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_West O.D., Jacob Contributor address; City; State; Zip Code Flint, TX 75762			Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	5)		
			,			

	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 61/64 Rpt: 64/69	
2	FILER NAME Texas Opton	netric PAC		3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor out-of-state PAC (ID# Wiechmann O.D., Alexandra Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$20.20
_		San Antonio, TX 78209	1	_		
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID# Wild O.D., Tristan Contributor address; City; State; Zip Code	<u>; </u>		Amount of Contribution (\$)	\$100.00
	Principal occu	Austin, TX 78730 pation / Job title (See Instructions)	Employer (See Instructions	;) 		
	Optometrist	auton 7 300 title (See mandellons)	Employer (See instructions	"		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID# Wilken O.D., Bret Contributor address; City; State; Zip Code	<u>†:)</u>	•	Amount of Contribution (\$)	\$50.00
		Coppell, TX 75019				
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID) Williams O.D., Bryan Contributor address; City; State; Zip Code Dallas, TX 75226	#:)		Amount of Contribution (\$)	\$20.20
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID# Williams O.D., James Contributor address; City; State; Zip Code Joplin, MO 64804			Amount of Contribution (\$)	\$50.00
	Principal occu Optometrist	oation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONETARY POLITICAL CONTRIBUTIONS			SCHEDUL	ULE A1	
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 62/64 Rpt: 65/69	
2	FILER NAME Texas Optor			3	Filer ID (Ethics Commission 00015622	n Filers)
4	Date 11/15/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$10.40
_	Dringing Logg	Reed City, MI 49677-1167	D. Employer (See Instructions			
8	Optometrist	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor			Amount of Contribution (\$)	\$100.00
	Dringing aggr	Terrell, TX 75160 pation / Job title (See Instructions)	Employer (See Instructions			
	Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor)		Amount of Contribution (\$)	\$50.00
		Kingwood, TX 77339				
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Wright O.D., David Contributor address; City; State; Zip Code Seminole, TX 79360)		Amount of Contribution (\$)	\$200.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Wright O.D., Lance Contributor address; City; State; Zip Code Seminole, TX 79360)		Amount of Contribution (\$)	\$100.00
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUT	TIONS		SCHEDUL	E A1	
	The Instru	ction Guide explains how to complete thi	is form.		Total pages Schedule A1: Sch: 63/64 Rpt: 66/69		
2	FILER NAME Texas Optor	netric PAC		- 1	Filer ID (Ethics Commission 00015622	ımission Filers)	
4	Date 11/15/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$10.40	
		San Antonio, TX 78247					
8	Principal occu Optometrist	pation / Job title (See Instructions)	9 Employer (See Instruction:	าร)			
	Date 11/15/2024	Full name of contributor out-of-state PAC (I Yee O.D., Jamie Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$100.00	
	Dringing agg	Dallas, TX 75033	Employer (See Instruction				
	Optometrist	pation / Job title (See Instructions)	Employer (See Instruction:	15)			
	Date 11/15/2024	Full name of contributor out-of-state PAC (I Yeh O.D., Shihwei Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$50.00	
		Frisco, TX 75035					
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instruction:	ns)			
	Date 11/15/2024	Full name of contributor out-of-state PAC (I Yousef O.D., Deliah Contributor address; City; State; Zip Code Austin, TX 78746	D#:)		Amount of Contribution (\$)	\$104.00	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instruction	ns)			
	Date 11/15/2024	Full name of contributor out-of-state PAC (I Zhang O.D., Joyce Contributor address; City; State; Zip Code San Antonio, TX 78209	D#:)		Amount of Contribution (\$)	\$20.20	
	Principal occu Optometrist	pation / Job title (See Instructions)	Employer (See Instructions	ns)			
			1				

TARY POLITICAL CONTRIBUT	IONS	SCHEDULE A1
uction Guide explains how to complete thi	s form.	1 Total pages Schedule A1: Sch: 64/64 Rpt: 67/69
E ometric PAC		3 Filer ID (Ethics Commission Filers) 00015622
5 Full name of contributor out-of-state PAC (IE Zike O.D., Abigail 6 Contributor address; City; State; Zip Code)	7 Amount of Contribution (\$) \$52.0
College Station, TX 77845	9 Employer (See Instructions	s)
t	2 Employer (ede mendenens	
_ L _ E	procession Guide explains how to complete this explains the comple	metric PAC 5 Full name of contributor out-of-state PAC (ID#:) Zike O.D., Abigail 6 Contributor address; City; State; Zip Code College Station, TX 77845 upation / Job title (See Instructions) 9 Employer (See Instruction

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

	The Instruction Guide explains how to	complete this form.
Total pages Schedule I: Sch: 1/2 Rpt:	2 FILER NAME Texas Optometric PAC	3 Filer ID (Ethics Commission Filers) 00015622
Date 11/14/2024	5 Payee name Authorize.net	·
Amount (\$) 78.55 Expenditure from corporate funds	7 Payee Address; City; State; Zip 808 E Utah Valley Dr American Fork, UT 84003	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Accounting Services & Bank Fees
Date	Payee name	
11/05/2024	Carriage House Partners	
Amount (\$) 6,250.00 Expenditure from corporate funds	Payee Address; City; State; Zip 5502 Hidden Trails Arlington, TX 76017	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Lobbyist
Date	Payee name	
11/11/2024	Clem, Mike	
Amount (\$) 1,421.50 Expenditure from	Payee Address; City; State; Zip 10155 Shadyview	
corporate funds	Dallas, TX 75238	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required.) Accounting Services & Bank Fees
Date	Payee name	
11/25/2024	Paypal City State 7in	
Amount (\$) 527.24	Payee Address; City; State; Zip 2211 North First Street	
Expenditure from corporate funds	San Jose, CA 95131	
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Payment fee

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

	The Instruction Guide explains how to complete this form.							
Total pages Schedule I: Sch: 2/2 Rpt:	2 FILER NAME Texas Optometric PAC 3 Filer ID (Ethics Commission Filers) 00015622							
4 Date 11/23/2024	5 Payee name QuickBooks Payments							
6 Amount (\$) 637.36 Expenditure from corporate funds	7 Payee Address; City; State; Zip 2632 Marine Way Mountain View, CA 94043							
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking (b) Description (See instructions regarding type of information required.) Accounting Services & Bank Fees							