

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Lake Travis Voices for Progress	13 Filer ID (Ethics Commission Filers) 00087896
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	<input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold		
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	4,002.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	438.95
	4. TOTAL POLITICAL EXPENDITURES	\$	3,690.07
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	7,645.31
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

16 AFFIDAVIT

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

Mr. Edward Page

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

SUBTOTALS - GPAC

17 COMMITTEE NAME Lake Travis Voices for Progress		18 Filer ID (Ethics Commission Filers) 00087896
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 4,002.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 0.00
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 3,690.07
11.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
12.	<input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$ 0.00
13.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/20 Rpt: 4/32
2 FILER NAME Lake Travis Voices for Progress		3 Filer ID (Ethics Commission Filers) 00087896
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Camp, Kelly <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78734-2450	7 Amount of Contribution (\$) \$24.25
8 Principal occupation / Job title (See Instructions) sales		9 Employer (See Instructions) self
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Camp, Kelly <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78734-2450	Amount of Contribution (\$) \$24.25
Principal occupation / Job title (See Instructions) sales		Employer (See Instructions) self
Date 10/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Camp, Kelly <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78734-2450	Amount of Contribution (\$) \$24.25
Principal occupation / Job title (See Instructions) sales		Employer (See Instructions) self
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Camp, Kelly <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78734-2450	Amount of Contribution (\$) \$24.25
Principal occupation / Job title (See Instructions) sales		Employer (See Instructions) self
Date 08/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Camp, Kelly <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78734-2450	Amount of Contribution (\$) \$24.25
Principal occupation / Job title (See Instructions) sales		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/20 Rpt: 5/32
2 FILER NAME Lake Travis Voices for Progress		3 Filer ID (Ethics Commission Filers) 00087896
4 Date 07/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Camp, Kelly <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78734-2450	7 Amount of Contribution (\$) \$24.25
8 Principal occupation / Job title (See Instructions) sales		9 Employer (See Instructions) self
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duty, Cory <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$24.25
Principal occupation / Job title (See Instructions) Retired Principal		Employer (See Instructions) NA
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duty, Cory <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$24.25
Principal occupation / Job title (See Instructions) Retired Principal		Employer (See Instructions) NA
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duty, Cory <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$24.25
Principal occupation / Job title (See Instructions) Retired Principal		Employer (See Instructions) NA
Date 09/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duty, Cory <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$24.25
Principal occupation / Job title (See Instructions) Retired Principal		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/20 Rpt: 6/32
2 FILER NAME Lake Travis Voices for Progress		3 Filer ID (Ethics Commission Filers) 00087896
4 Date 08/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duty, Cory <hr/> 6 Contributor address; City; State; Zip Code Lakeway, TX 78734	7 Amount of Contribution (\$) \$24.25
8 Principal occupation / Job title (See Instructions) Retired Principal		9 Employer (See Instructions) NA
Date 07/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duty, Cory <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78734	Amount of Contribution (\$) \$24.25
Principal occupation / Job title (See Instructions) Retired Principal		Employer (See Instructions) NA
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferrie, Donna <hr/> Contributor address; City; State; Zip Code Austin, TX 78734	Amount of Contribution (\$) \$4.85
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferrie, Donna <hr/> Contributor address; City; State; Zip Code Austin, TX 78734	Amount of Contribution (\$) \$4.85
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferrie, Donna <hr/> Contributor address; City; State; Zip Code Austin, TX 78734	Amount of Contribution (\$) \$4.85
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/20 Rpt: 7/32
2 FILER NAME Lake Travis Voices for Progress		3 Filer ID (Ethics Commission Filers) 00087896
4 Date 09/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferrie, Donna <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78734	7 Amount of Contribution (\$) \$4.85
8 Principal occupation / Job title (See Instructions) NA		9 Employer (See Instructions) NA
Date 08/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferrie, Donna <hr/> Contributor address; City; State; Zip Code Austin, TX 78734	Amount of Contribution (\$) \$4.85
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferrie, Donna <hr/> Contributor address; City; State; Zip Code Austin, TX 78734	Amount of Contribution (\$) \$4.85
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Matt <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78734-2043	Amount of Contribution (\$) \$4.85
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Barnett and Garcia
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Matt <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78734-2043	Amount of Contribution (\$) \$4.85
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Barnett and Garcia

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/20 Rpt: 8/32
2 FILER NAME Lake Travis Voices for Progress		3 Filer ID (Ethics Commission Filers) 00087896
4 Date 10/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Matt	7 Amount of Contribution (\$) \$4.85
6 Contributor address; City; State; Zip Code AUSTIN, TX 78734-2043		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Barnett and Garcia
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Matt	Amount of Contribution (\$) \$4.85
Contributor address; City; State; Zip Code AUSTIN, TX 78734-2043		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Barnett and Garcia
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Matt	Amount of Contribution (\$) \$4.85
Contributor address; City; State; Zip Code AUSTIN, TX 78734-2043		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Barnett and Garcia
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Matt	Amount of Contribution (\$) \$4.85
Contributor address; City; State; Zip Code AUSTIN, TX 78734-2043		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Barnett and Garcia
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnston, Katie	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code AUSTIN, TX 78734-1739		
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) Keller Williams Lake Travis

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/20 Rpt: 9/32
2 FILER NAME Lake Travis Voices for Progress		3 Filer ID (Ethics Commission Filers) 00087896
4 Date 10/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnston, Katie <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78734-1739	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) REALTOR		9 Employer (See Instructions) Keller Williams Lake Travis
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnston, Katie <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78734-1739	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) Keller Williams Lake Travis
Date 08/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnston, Katie <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78734-1739	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) Keller Williams Lake Travis
Date 07/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnston, Katie <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78734-1739	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) REALTOR		Employer (See Instructions) Keller Williams Lake Travis
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Carl <hr/> Contributor address; City; State; Zip Code SPICEWOOD, TX 78669-1813	Amount of Contribution (\$) \$9.70
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/20 Rpt: 10/32
2 FILER NAME Lake Travis Voices for Progress		3 Filer ID (Ethics Commission Filers) 00087896
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Carl 6 Contributor address; City; State; Zip Code SPICEWOOD, TX 78669-1813	7 Amount of Contribution (\$) \$9.70
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Carl Contributor address; City; State; Zip Code SPICEWOOD, TX 78669-1813	Amount of Contribution (\$) \$9.70
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Carl Contributor address; City; State; Zip Code SPICEWOOD, TX 78669-1813	Amount of Contribution (\$) \$9.70
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Carl Contributor address; City; State; Zip Code SPICEWOOD, TX 78669-1813	Amount of Contribution (\$) \$9.70
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Carl Contributor address; City; State; Zip Code SPICEWOOD, TX 78669-1813	Amount of Contribution (\$) \$9.70
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/20 Rpt: 11/32
2 FILER NAME Lake Travis Voices for Progress		3 Filer ID (Ethics Commission Filers) 00087896
4 Date 09/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Carl <hr/> 6 Contributor address; City; State; Zip Code SPICEWOOD, TX 78669-1813	7 Amount of Contribution (\$) \$9.70
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Carl <hr/> Contributor address; City; State; Zip Code SPICEWOOD, TX 78669-1813	Amount of Contribution (\$) \$9.70
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Carl <hr/> Contributor address; City; State; Zip Code SPICEWOOD, TX 78669-1813	Amount of Contribution (\$) \$9.70
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Carl <hr/> Contributor address; City; State; Zip Code SPICEWOOD, TX 78669-1813	Amount of Contribution (\$) \$9.70
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Carl <hr/> Contributor address; City; State; Zip Code SPICEWOOD, TX 78669-1813	Amount of Contribution (\$) \$9.70
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/20 Rpt: 12/32
2 FILER NAME Lake Travis Voices for Progress		3 Filer ID (Ethics Commission Filers) 00087896
4 Date 07/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Carl <hr/> 6 Contributor address; City; State; Zip Code SPICEWOOD, TX 78669-1813	7 Amount of Contribution (\$) \$9.70
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lemons, Margie <hr/> Contributor address; City; State; Zip Code SPICEWOOD, TX 78669-6551	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marston, Amberly <hr/> Contributor address; City; State; Zip Code Austin, TX 78738	Amount of Contribution (\$) \$4.85
Principal occupation / Job title (See Instructions) Branch Metrics		Employer (See Instructions) HR Manager
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marston, Amberly <hr/> Contributor address; City; State; Zip Code Austin, TX 78738	Amount of Contribution (\$) \$4.85
Principal occupation / Job title (See Instructions) Branch Metrics		Employer (See Instructions) HR Manager
Date 10/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marston, Amberly <hr/> Contributor address; City; State; Zip Code Austin, TX 78738	Amount of Contribution (\$) \$4.85
Principal occupation / Job title (See Instructions) Branch Metrics		Employer (See Instructions) HR Manager

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/20 Rpt: 13/32
2 FILER NAME Lake Travis Voices for Progress		3 Filer ID (Ethics Commission Filers) 00087896
4 Date 09/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marston, Amberly <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78738	7 Amount of Contribution (\$) \$4.85
8 Principal occupation / Job title (See Instructions) Branch Metrics		9 Employer (See Instructions) HR Manager
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marston, Amberly <hr/> Contributor address; City; State; Zip Code Austin, TX 78738	Amount of Contribution (\$) \$4.85
Principal occupation / Job title (See Instructions) Branch Metrics		Employer (See Instructions) HR Manager
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marston, Amberly <hr/> Contributor address; City; State; Zip Code Austin, TX 78738	Amount of Contribution (\$) \$4.85
Principal occupation / Job title (See Instructions) Branch Metrics		Employer (See Instructions) HR Manager
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McClanahan, Lisa <hr/> Contributor address; City; State; Zip Code LAKEWAY, TX 78734-6262	Amount of Contribution (\$) \$97.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McClanahan, Lisa <hr/> Contributor address; City; State; Zip Code LAKEWAY, TX 78734-6262	Amount of Contribution (\$) \$97.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/20 Rpt: 14/32
2 FILER NAME Lake Travis Voices for Progress		3 Filer ID (Ethics Commission Filers) 00087896
4 Date 10/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McClanahan, Lisa	7 Amount of Contribution (\$) \$97.00
6 Contributor address; City; State; Zip Code LAKEWAY, TX 78734-6262		
8 Principal occupation / Job title (See Instructions) Business Owner		9 Employer (See Instructions) Self
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McClanahan, Lisa	Amount of Contribution (\$) \$97.00
Contributor address; City; State; Zip Code LAKEWAY, TX 78734-6262		
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McClanahan, Lisa	Amount of Contribution (\$) \$97.00
Contributor address; City; State; Zip Code LAKEWAY, TX 78734-6262		
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McClanahan, Lisa	Amount of Contribution (\$) \$97.00
Contributor address; City; State; Zip Code LAKEWAY, TX 78734-6262		
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Self
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McFarland, Jane	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code SPICEWOOD, TX 78669-2300		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Na

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/20 Rpt: 15/32
2 FILER NAME Lake Travis Voices for Progress		3 Filer ID (Ethics Commission Filers) 00087896
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McFarland, Jane <hr/> 6 Contributor address; City; State; Zip Code SPICEWOOD, TX 78669-2300	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Na
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McFarland, Jane <hr/> Contributor address; City; State; Zip Code SPICEWOOD, TX 78669-2300	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Na
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McFarland, Jane <hr/> Contributor address; City; State; Zip Code SPICEWOOD, TX 78669-2300	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Na
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McFarland, Jane <hr/> Contributor address; City; State; Zip Code SPICEWOOD, TX 78669-2300	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Na
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McFarland, Jane <hr/> Contributor address; City; State; Zip Code SPICEWOOD, TX 78669-2300	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Na

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/20 Rpt: 16/32
2 FILER NAME Lake Travis Voices for Progress		3 Filer ID (Ethics Commission Filers) 00087896
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Migliuri, Georgia	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code LAKEWAY, TX 78734-3844		
8 Principal occupation / Job title (See Instructions) Regional Manager		9 Employer (See Instructions) Gen Media Partners
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Migliuri, Georgia	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code LAKEWAY, TX 78734-3844		
Principal occupation / Job title (See Instructions) Regional Manager		Employer (See Instructions) Gen Media Partners
Date 10/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Migliuri, Georgia	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code LAKEWAY, TX 78734-3844		
Principal occupation / Job title (See Instructions) Regional Manager		Employer (See Instructions) Gen Media Partners
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Migliuri, Georgia	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code LAKEWAY, TX 78734-3844		
Principal occupation / Job title (See Instructions) Regional Manager		Employer (See Instructions) Gen Media Partners
Date 08/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Migliuri, Georgia	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code LAKEWAY, TX 78734-3844		
Principal occupation / Job title (See Instructions) Regional Manager		Employer (See Instructions) Gen Media Partners

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/20 Rpt: 17/32
2 FILER NAME Lake Travis Voices for Progress		3 Filer ID (Ethics Commission Filers) 00087896
4 Date 07/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Migliuri, Georgia	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code LAKEWAY, TX 78734-3844		
8 Principal occupation / Job title (See Instructions) Regional Manager		9 Employer (See Instructions) Gen Media Partners
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montgomery, Jennifer	Amount of Contribution (\$) \$97.00
Contributor address; City; State; Zip Code AUSTIN, TX 78734-6262		
Principal occupation / Job title (See Instructions) Marketer		Employer (See Instructions) IFF
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montgomery, Jennifer	Amount of Contribution (\$) \$97.00
Contributor address; City; State; Zip Code AUSTIN, TX 78734-6262		
Principal occupation / Job title (See Instructions) Marketer		Employer (See Instructions) IFF
Date 10/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montgomery, Jennifer	Amount of Contribution (\$) \$97.00
Contributor address; City; State; Zip Code AUSTIN, TX 78734-6262		
Principal occupation / Job title (See Instructions) Marketer		Employer (See Instructions) IFF
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montgomery, Jennifer	Amount of Contribution (\$) \$97.00
Contributor address; City; State; Zip Code AUSTIN, TX 78734-6262		
Principal occupation / Job title (See Instructions) Marketer		Employer (See Instructions) IFF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/20 Rpt: 18/32
2 FILER NAME Lake Travis Voices for Progress		3 Filer ID (Ethics Commission Filers) 00087896
4 Date 08/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montgomery, Jennifer	7 Amount of Contribution (\$) \$97.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78734-6262		
8 Principal occupation / Job title (See Instructions) Marketer		9 Employer (See Instructions) IFF
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montgomery, Jennifer	Amount of Contribution (\$) \$97.00
Contributor address; City; State; Zip Code AUSTIN, TX 78734-6262		
Principal occupation / Job title (See Instructions) Marketer		Employer (See Instructions) IFF
Date 12/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Page, Ed	Amount of Contribution (\$) \$48.50
Contributor address; City; State; Zip Code Lakeway, TX 78738		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Page, Ed	Amount of Contribution (\$) \$48.50
Contributor address; City; State; Zip Code Lakeway, TX 78738		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Page, Ed	Amount of Contribution (\$) \$48.50
Contributor address; City; State; Zip Code Lakeway, TX 78738		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/20 Rpt: 19/32
2 FILER NAME Lake Travis Voices for Progress		3 Filer ID (Ethics Commission Filers) 00087896
4 Date 09/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Page, Ed <hr/> 6 Contributor address; City; State; Zip Code Lakeway, TX 78738	7 Amount of Contribution (\$) \$48.50
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NA
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Page, Ed <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78738	Amount of Contribution (\$) \$48.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Page, Ed <hr/> Contributor address; City; State; Zip Code Lakeway, TX 78738	Amount of Contribution (\$) \$48.50
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tuthill, Sarah <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78734-3341	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Texas Medical Board
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tuthill, Sarah <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78734-3341	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Texas Medical Board

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/20 Rpt: 20/32
2 FILER NAME Lake Travis Voices for Progress		3 Filer ID (Ethics Commission Filers) 00087896
4 Date 10/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tuthill, Sarah	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code AUSTIN, TX 78734-3341		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Texas Medical Board
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tuthill, Sarah	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78734-3341		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Texas Medical Board
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tuthill, Sarah	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78734-3341		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Texas Medical Board
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tuthill, Sarah	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code AUSTIN, TX 78734-3341		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Texas Medical Board
Date 08/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willinger, Becky	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code THE HILLS, TX 78738-1424		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/20 Rpt: 21/32
2 FILER NAME Lake Travis Voices for Progress		3 Filer ID (Ethics Commission Filers) 00087896
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zuzana, Zuzana	7 Amount of Contribution (\$) \$4.85
6 Contributor address; City; State; Zip Code AUSTIN, TX 78738-5485		
8 Principal occupation / Job title (See Instructions) Bookkeeper		9 Employer (See Instructions) E-Flux
Date 11/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zuzana, Zuzana	Amount of Contribution (\$) \$4.85
Contributor address; City; State; Zip Code AUSTIN, TX 78738-5485		
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions) E-Flux
Date 10/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zuzana, Zuzana	Amount of Contribution (\$) \$4.85
Contributor address; City; State; Zip Code AUSTIN, TX 78738-5485		
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions) E-Flux
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zuzana, Zuzana	Amount of Contribution (\$) \$4.85
Contributor address; City; State; Zip Code AUSTIN, TX 78738-5485		
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions) E-Flux
Date 08/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zuzana, Zuzana	Amount of Contribution (\$) \$4.85
Contributor address; City; State; Zip Code AUSTIN, TX 78738-5485		
Principal occupation / Job title (See Instructions) Bookkeeper		Employer (See Instructions) E-Flux

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/20 Rpt: 22/32
2 FILER NAME Lake Travis Voices for Progress		3 Filer ID (Ethics Commission Filers) 00087896
4 Date 07/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zuzana, Zuzana	7 Amount of Contribution (\$) \$4.85
6 Contributor address; City; State; Zip Code AUSTIN, TX 78738-5485		
8 Principal occupation / Job title (See Instructions) Bookkeeper		9 Employer (See Instructions) E-Flux
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) crane, sarah	Amount of Contribution (\$) \$9.70
Contributor address; City; State; Zip Code VLG O THE HLS, TX 78738		
Principal occupation / Job title (See Instructions) US General Services Administration		Employer (See Instructions) Division Director
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) crane, sarah	Amount of Contribution (\$) \$9.70
Contributor address; City; State; Zip Code VLG O THE HLS, TX 78738		
Principal occupation / Job title (See Instructions) US General Services Administration		Employer (See Instructions) Division Director
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) crane, sarah	Amount of Contribution (\$) \$9.70
Contributor address; City; State; Zip Code VLG O THE HLS, TX 78738		
Principal occupation / Job title (See Instructions) US General Services Administration		Employer (See Instructions) Division Director
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) crane, sarah	Amount of Contribution (\$) \$9.70
Contributor address; City; State; Zip Code VLG O THE HLS, TX 78738		
Principal occupation / Job title (See Instructions) US General Services Administration		Employer (See Instructions) Division Director

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/20 Rpt: 23/32
2 FILER NAME Lake Travis Voices for Progress		3 Filer ID (Ethics Commission Filers) 00087896
4 Date 08/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) crane, sarah <hr/> 6 Contributor address; City; State; Zip Code VLG O THE HLS, TX 78738	7 Amount of Contribution (\$) \$9.70
8 Principal occupation / Job title (See Instructions) US General Services Administration		9 Employer (See Instructions) Division Director
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) crane, sarah <hr/> Contributor address; City; State; Zip Code VLG O THE HLS, TX 78738	Amount of Contribution (\$) \$9.70
Principal occupation / Job title (See Instructions) US General Services Administration		Employer (See Instructions) Division Director

PLEGGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:
Sch: 1/1 Rpt: 24/32

2 FILER NAME
Lake Travis Voices for Progress

3 Filer ID (Ethics Commission Filers)
00087896

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date

6 Full name of pledgor out-of-state PAC (ID#: _____)

8 Amount of
pledge (\$)

9 In-kind description
(If applicable)

7 Pledgor Address; City; State; Zip Code

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 25/32
2 FILER NAME Lake Travis Voices for Progress		3 Filer ID (Ethics Commission Filers) 00087896
4 TOTAL OF UNITEMIZED LOANS		\$ 0.00
5 Date of loan	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	9 Loan Amount (\$)
6 Is lender a financial institution?	8 Lender address; City; State; Zip Code	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/6 Rpt: 26/32	2 FILER NAME Lake Travis Voices for Progress	3 Filer ID (Ethics Commission Filers) 00087896
4 Date 12/02/2024	5 Payee name Google LLC	
6 Amount (\$) \$153.50 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1599 Amphitheatre Pkwy Mountain View, CA 94043	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Workspace
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 11/04/2024	Payee name Google LLC	
Amount (\$) \$153.50 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1599 Amphitheatre Pkwy Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Workspace
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 10/02/2024	Payee name Google LLC	
Amount (\$) \$153.50 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1599 Amphitheatre Pkwy Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Workspace
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/6 Rpt: 27/32	2 FILER NAME Lake Travis Voices for Progress	3 Filer ID (Ethics Commission Filers) 00087896
4 Date 09/03/2024	5 Payee name Google LLC	
6 Amount (\$) \$153.50 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1599 Amphitheatre Pkwy Mountain View, CA 94043	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Workspace
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/02/2024	Candidate/Officeholder name Office sought Office held	
Payee name Google LLC		
Amount (\$) \$153.50 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1599 Amphitheatre Pkwy Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Workspace
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/02/2024	Candidate/Officeholder name Office sought Office held	
Payee name Google LLC		
Amount (\$) \$153.50 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1599 Amphitheatre Pkwy Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Workspace
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/6 Rpt: 28/32	2 FILER NAME Lake Travis Voices for Progress	3 Filer ID (Ethics Commission Filers) 00087896
4 Date 07/03/2024	5 Payee name Hustle Inc	
6 Amount (\$) \$574.98 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 548 Market St San Francisco, CA 94104	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Text Campaign
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/09/2024	Candidate/Officeholder name Shopify	
Amount (\$) \$111.93 <input type="checkbox"/> Expenditure from corporate funds	Office sought 151 O'Connor St Ground Floor Ottawa ON K2P2L8 Canada	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Platform Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/08/2024	Candidate/Officeholder name Shopify	
Amount (\$) \$111.93 <input type="checkbox"/> Expenditure from corporate funds	Office sought 151 O'Connor St Ground Floor Ottawa ON K2P2L8 Canada	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Platform Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/6 Rpt: 29/32	2 FILER NAME Lake Travis Voices for Progress	3 Filer ID (Ethics Commission Filers) 00087896
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4 Date 10/09/2024	5 Payee name Shopify
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6 Amount (\$) \$111.93 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 151 O'Connor St Ground Floor Ottawa ON K2P2L8 Canada
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Platform Fee
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 09/09/2024	Payee name Shopify
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Amount (\$) \$111.93 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 151 O'Connor St Ground Floor Ottawa ON K2P2L8 Canada
--	--

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

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/12/2024	Payee name Shopify
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Amount (\$) \$111.93 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 151 O'Connor St Ground Floor Ottawa ON K2P2L8 Canada
--	--

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

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/6 Rpt: 30/32	2 FILER NAME Lake Travis Voices for Progress	3 Filer ID (Ethics Commission Filers) 00087896
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4 Date 07/10/2024	5 Payee name Shopify
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6 Amount (\$) \$111.93 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 151 O'Connor St Ground Floor Ottawa ON K2P2L8 Canada
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Platform Fee
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/18/2024	Payee name Sonesta
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Amount (\$) \$525.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 12525 Bee Cave Pkwy Bee Cave, TX 78738
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Election Watch Event
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/07/2024	Payee name Sonesta
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Amount (\$) \$98.72 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 12526 Bee Cave Pkwy Bee Cave, TX 78739
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Election Watch Event
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/6 Rpt: 31/32	2 FILER NAME Lake Travis Voices for Progress	3 Filer ID (Ethics Commission Filers) 00087896
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4 Date 11/06/2024	5 Payee name Sonesta
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6 Amount (\$) \$227.84	7 Payee address; City; State; Zip Code 12527 Bee Cave Pkwy Bee Cave, TX 78740
<input type="checkbox"/> Expenditure from corporate funds	

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Election Watch Event
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/03/2024	Payee name USPS
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Amount (\$) \$232.00	Payee address; City; State; Zip Code RR 620 Lakeway, TX 78738
<input type="checkbox"/> Expenditure from corporate funds	

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

Sch: 1/1 Rpt: 32/32

FILER NAME

Lake Travis Voices for Progress

Filer ID (Ethics Commission Filers)

00087896

Schedule

Cover Sheet

Information entered by filer as a memo:

We did not actively endorse or support candidates or measures during this period.