FORM GPAC GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00058206 3 COMMITTEE NAME **OFFICE USE ONLY** Texas Oral and Maxillofacial Surgeons Political Action Committee Date Received **ELECTRONICALLY FILED** 01/07/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 12050 Vance Jackson Road Date Hand-delivered or Date Postmarked Suite #102 Change of Address San Antonio, TX 78230 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Ms. Lisa A. NAME NICKNAME LAST **SUFFIX** Aguilar STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 12050 Vance Jackson Rd. STREET **ADDRESS** Ste. 102 (Residence or Business) San Antonio, TX 78230 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 12050 Vance Jackson Rd. MAILING **ADDRESS** Ste. 102 San Antonio, TX 78230 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (210) 988-0960 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Day Day Month Year Month **COVERED THROUGH** 07/01/2024 12/31/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other χ General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC** COVER SHEET PG 2

L2 COMMITTEE NAME			13 Filer II	(Ethics Commission Filers)
Texas Oral and Maxil	lofacial Surgeons Politica	al Action Committee	00058	206
4 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.)	A. Supported		
		B. Opposed		
	3. Officeholders Assisted			
	(Identify by name or, if applicable, classify by party.)			
5 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAT OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	AN \$	0.00
	2. TOTAL POLITICA		NS)	25,241.65
EXPENDITURE TOTALS		POLITICAL EXPENDITURES	\$	0.00
TOTALS	4. TOTAL POLITICA	L EXPENDITURES	\$	
			φ	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE GPERIOD	LAST DAY \$	45,088.69
OUTSTANDING LOAN TOTALS	1	AMOUNT OF ALL OUTSTANDING LOANS AS REPORTING PERIOD	S OF THE	0.00
6 AFFIDAVIT				
		I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.		
			. Lisa A. Aguila	
		Signature	of Campaign Tr	easurer
AFFIX NOTA	RY STAMP / SEAL ABOVE			
Sworn to and subscrib	ed before me, by the said _		, this the	day
		which, witness my hand and seal of office.	-	
Signature of officer	administering oath	Printed name of officer administering oath	Title o	f officer administering oath

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

				3 of 23
17 COMMI	TEE NAME	18 Filer ID	(Ethics Commission	n Filers)
Texas (Dral and Maxillofacial Surgeons Political Action Committee	00058206		,
	JLE SUBTOTALS	<u> </u>	T	
l	F SCHEDULE		SUBTOTAL A	TNUOMA
			<u> </u>	
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	25,241.65
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
_	, , , , , , , , , , , , , , , , , , ,		ļ ·	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
] ^{3.} L	SCHEDOLE B. I LEDOLD CONTRIBOTIONS		P	
_ , _	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LAB	OR		
4.	ORGANIZATION		\$	
_	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPOR	ATION OR		
5.	LABOR ORGANIZATION		\$	
			 	
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORC	GANIZATION	\$	
			<u> </u>	
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	₹	 \$	
_	ONDANIZATION		ļ ·	
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$	
			Ψ	
9.	SCHEDULE E: LOANS			
9.	SCHEDOLE E. LOANS		\$	
10	COURT IN E EA. DOUTEON EVENINTUES EDOM DOUTEON CONTRIBUTION	10		
10.	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	NS	\$	
_				
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUT	IONS	\$	
			-	
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUT	IONS	\$	
_			T	
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS	RETURNED	\$	
13. ∟	TO FILER		P	
I				

	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: 1/20 Rpt: 4/23	
2	FILER NAME Texas Oral a	nd Maxillofacial Surgeons Political Action Committe	е	3	Filer ID (Ethics Commission 00058206	n Filers)
4	Date 11/13/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$200.00
_		Sugar Land , TX 77479				
8	Principal occu OMS	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 08/19/2024	Full name of contributor			Amount of Contribution (\$)	\$200.00
	Dringing! aggs	Houston , TX 77030	Employer (See Instructions	_		
	OMS	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/31/2024	Full name of contributor out-of-state PAC (ID#:_Alfi, David (Dr.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$200.00
		Houston, TX 77030				
	Principal occu OMS	oation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/06/2024	Full name of contributor out-of-state PAC (ID#:_Amarista, Felix (Dr.) Contributor address; City; State; Zip Code San Antonio, TX 78229)		Amount of Contribution (\$)	\$200.00
	•	oation / Job title (See Instructions) ofacial Surgeon	Employer (See Instructions)		
	Date 11/11/2024	Full name of contributor out-of-state PAC (ID#:_Balandran, Steven (Dr.) Contributor address; City; State; Zip Code Spring, TX 77379			Amount of Contribution (\$)	\$200.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONEI	ARY POLITICAL C	CONTRIBUTION	15		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 2/20 Rpt: 5/23	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	Texas Oral a	and Maxillofacial Surgeons Po	litical Action Committee			00058206	
4	Date 11/06/2024	5 Full name of contributor Barrett, George (Dr.)6 Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code)	7	Amount of Contribution (\$)	\$200.00
		Lubbock, TX 79424		5 1 (0 1 1 1			
8		pation / Job title (See Instructions) 9	1 7 (5)		
	Oral & Maxil	lofacial Surgeon		self			
	Date 11/15/2024	Full name of contributor Brockhoff, Hans (Dr.) Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code			Amount of Contribution (\$)	\$200.00
		El Paso, TX 79925					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Oral & Maxil	lofacial Surgeon		self			
	Date 11/07/2024	Full name of contributor Buckley, Steven (Dr.) Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code)		Amount of Contribution (\$)	\$200.00
		San Antonio, TX 78229					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Oral & Maxil	lofacial Surgeon		self			
	Date 08/19/2024	Full name of contributor Cain, William Curt (Dr.) Contributor address; City; St Georgetown, TX 78628	out-of-state PAC (ID#: ate; Zip Code			Amount of Contribution (\$)	\$200.00
		pation / Job title (See Instructions Iofacial Surgeon)	Employer (See Instructions self	s)		
	Date 08/21/2024	Full name of contributor Campbell, Andrew (Dr.) Contributor address; City; St Killeen, TX 76542	out-of-state PAC (ID#:ate; Zip Code)		Amount of Contribution (\$)	\$200.00
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Oral & Maxil	lofacial Surgeons		self			
			·				

	MONET	ARY POLITICAL CONTR	RIBUTION	IS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to comp	lete this for	n.	1	Total pages Schedule A1: Sch: 3/20 Rpt: 6/23	
2	FILER NAME Texas Oral a	nd Maxillofacial Surgeons Political Actio	n Committee		3	Filer ID (Ethics Commission 00058206	n Filers)
4	Date 08/21/2024	Carrillo, Francisco (Dr.)	ate PAC (ID#:)	7	Amount of Contribution (\$)	\$200.00
_		Sugar Land, TX 77479					
8	Principal occu OMS	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 07/08/2024	Clarot, Samuel (Dr.)				Amount of Contribution (\$)	\$200.00
	Principal occu	San Antonio, TX 78215 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	OMS	, ,					
	Date 11/11/2024	Full name of contributor out-of-state Clarot, Samuel (Dr.) Contributor address; City; State; Zip Cod	ate PAC (ID#:)		Amount of Contribution (\$)	\$200.00
		San Antonio, TX 78215					
	Principal occu OMS	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 07/15/2024	Cockrell, Rex (Dr.)				Amount of Contribution (\$)	\$200.00
	'	oation / Job title (See Instructions) ofacial Surgeon		Employer (See Instructions self	5)		
	Date 11/03/2024	Full name of contributor out-of-star Cooper-Newland, Deborah (Dr.) Contributor address; City; State; Zip Coo	ate PAC (ID#:)		Amount of Contribution (\$)	\$200.00
	•	oation / Job title (See Instructions) ofacial Surgeon		Employer (See Instructions Self	()		
			•				

	MONEI	ARY POLITICAL (CONTRIBUTIO	Ν	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 4/20 Rpt: 7/23	
2	FILER NAME					3	Filer ID (Ethics Commission	n Filers)
		and Maxillofacial Surgeons Po				L	00058206	
4	Date 11/05/2024	5 Full name of contributorDavis, Mark (Dr.)6 Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code)	7	Amount of Contribution (\$)	\$200.00
Q	Principal occu	Frisco, TX 75034 pation / Job title (See Instructions		a	Employer (See Instructions	·,		
0		pation / 300 title (See instructions Iofacial Surgeon)	9	self	·)		
	Date 08/25/2024	Full name of contributor Deljavan, Nima (Dr.) Contributor address; City; St	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$200.00
		Fort Worth, TX 76116						
	Principal occu OMS	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 10/31/2024	Full name of contributor Demian, Nagi (Dr.) Contributor address; City; Si	out-of-state PAC (ID#:_ ate; Zip Code)		Amount of Contribution (\$)	\$200.00
		Houston, TX 77030						
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	doctor				self			
	Date 08/21/2024	Full name of contributor Diaz, Manuel (Dr.) Contributor address; City; St Houston, TX 77034	out-of-state PAC (ID#:_ ate; Zip Code				Amount of Contribution (\$)	\$200.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>l </u>		
	Date 10/31/2024	Full name of contributor Ding, Michael (Dr.) Contributor address; City; St Cedar Park, TX 78613	out-of-state PAC (ID#:_ ate; Zip Code)		Amount of Contribution (\$)	\$200.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONT	S		SCHEDUL	E A1	
	The Instruc	ction Guide explains how to com	nplete this for	m.	1	Total pages Schedule A1: Sch: 5/20 Rpt: 8/23	
2	FILER NAME Texas Oral a	nd Maxillofacial Surgeons Political Act	tion Committee		3	Filer ID (Ethics Commission 00058206	n Filers)
4	Date 11/05/2024	Dombrowski, Jeffrey (Dr.)	-state PAC (ID#:)	7	Amount of Contribution (\$)	\$200.00
_	5	Carrollton , TX 75010	- la	5 1 (0 1 : 1			
8	OMS	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 11/04/2024	Full name of contributor out-of- Dyke, Jeffrey (Dr.) Contributor address; City; State; Zip C)		Amount of Contribution (\$)	\$200.00
		McAllen , TX 78504					
	Principal occu OMS	pation / Job title (See Instructions)		Employer (See Instructions	i)		
	Date 11/03/2024	Full name of contributor out-of- Franco, James (Dr.) Contributor address; City; State; Zip C	-state PAC (ID#:)		Amount of Contribution (\$)	\$200.00
		San Antonio, TX 78229					
		pation / Job title (See Instructions) ofacial Surgeon		Employer (See Instructions self	i)		
	Date 10/31/2024	Full name of contributor out-of- Furchtgott, Natasha (Dr.) Contributor address; City; State; Zip C El Paso, TX 79925				Amount of Contribution (\$)	\$200.00
	•	oation / Job title (See Instructions) ofacial Surgeon		Employer (See Instructions self	()		
	Date 11/13/2024	Full name of contributor out-of-Giglou, Kamyar (Dr.) Contributor address; City; State; Zip C	-state PAC (ID#:)		Amount of Contribution (\$)	\$200.00
	Principal occu OMS	oation / Job title (See Instructions)		Employer (See Instructions	i)		
			1				

	MONET	ARY POLITICAL C	ONTRIBUTIO	N	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how	to complete this fo	rr	n.	1	Total pages Schedule A1: Sch: 6/20 Rpt: 9/23	
2	FILER NAME Texas Oral a	and Maxillofacial Surgeons Po	itical Action Committee)		3	Filer ID (Ethics Commission 00058206	ı Filers)
4	Date 10/31/2024	5 Full name of contributor Gonzalez, Luis (Dr.)6 Contributor address; City; St.	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$200.00
8	Principal occu	Cypress, TX 77429 pation / Job title (See Instructions) [9	Employer (See Instructions	 		
		ofacial Surgeon			self	•		
	Date 11/22/2024	Full name of contributor Hanna, Issa (Dr.) Contributor address; City; St.)		Amount of Contribution (\$)	\$200.00
		Houston , TX 77030						
	Principal occu OMS	pation / Job title (See Instructions			Employer (See Instructions	5)		
	Date 11/08/2024	Full name of contributor Harrison II, Craig (Dr.) Contributor address; City; St	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$200.00
		Fort Worth, TX 76132						
	Principal occu OMS	pation / Job title (See Instructions			Employer (See Instructions	s)		
	Date 11/03/2024	Full name of contributor Hijano, Ivan (Dr.) Contributor address; City; St Houston, TX 77077)		Amount of Contribution (\$)	\$200.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>l</u> 5)		
	Date 11/21/2024	Full name of contributor Houari, Sammy (Dr.) Contributor address; City; St. Prosper, TX 75078	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$200.00
	Principal occu	pation / Job title (See Instructions			Employer (See Instructions	5)		

	MONET	ARY POLITICAL C	CONTRIBUTIO	N	S		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	rr	n.	1	Total pages Schedule A1: Sch: 7/20 Rpt: 10/23	
2	FILER NAME Texas Oral a	and Maxillofacial Surgeons Pol	itical Action Committee	9		3	Filer ID (Ethics Commission 00058206	n Filers)
4	Date 10/31/2024	5 Full name of contributor Hunsaker, Robert (Dr.)6 Contributor address; City; States	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$200.00
	D: : 1	Austin, TX 78734						
8		pation / Job title (See Instructions) lofacial Surgeon	!	9	Employer (See Instructions self	5)		
	Date 10/31/2024	Full name of contributor James, Porchia (Dr.) Contributor address; City; Sta	out-of-state PAC (ID#: atte; Zip Code)		Amount of Contribution (\$)	\$200.00
	Principal occu	Frisco, TX 75033 pation / Job title (See Instructions)			Employer (See Instructions	<u> </u> s)		
	Date 11/03/2024	Full name of contributor Johnson, Christopher (Dr. Contributor address; City; Sta)	•	Amount of Contribution (\$)	\$200.00
	Principal occu	Dallas, TX 75205 pation / Job title (See Instructions)			Employer (See Instructions	<u> </u> s)		
	Date 11/04/2024	Full name of contributor Kaleem, Arshad (Dr.) Contributor address; City; Sta)	•	Amount of Contribution (\$)	\$200.00
	•	I pation / Job title (See Instructions) acial Surgeon			Employer (See Instructions	<u>l</u> s)		
	Date 10/31/2024	Full name of contributor Koo, Steven (Dr.) Contributor address; City; States the contributor of the contrib	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$200.00
	Principal occu doctor	pation / Job title (See Instructions)			Employer (See Instructions	5)		
			·					

	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: 8/20 Rpt: 11/23	
2	FILER NAME Texas Oral a	nd Maxillofacial Surgeons Political Action	Committee		3	Filer ID (Ethics Commission 00058206	n Filers)
4	Date 07/30/2024	 Full name of contributor out-of-state Lew, Kevin (Dr.) Contributor address; City; State; Zip Code 			7	Amount of Contribution (\$)	\$200.00
_	Dringing! aggs	Austin, TX 78705		Employer (Co.) Instructions	<u></u>		
8		pation / Job title (See Instructions) ofacial Surgeon	9	Employer (See Instructions	5)		
	Date 10/31/2024	Full name of contributor out-of-state Lin, Sheng Chuan (Dr.) Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$200.00
		Bee Cave, TX 78738			<u></u>		
	OMS	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/29/2024	Full name of contributor out-of-state Loh, Li Hsing (Dr.) Contributor address; City; State; Zip Code	e PAC (ID#:)		Amount of Contribution (\$)	\$200.00
		Flower Mound, TX 75028					
	Principal occu OMS	oation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 07/28/2024	Loh, Li Hsing (Dr.))		Amount of Contribution (\$)	\$200.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/03/2024	Full name of contributor out-of-state McKnight , Mitchell (Dr.) Contributor address; City; State; Zip Code Dallas, TX 75231	e PAC (ID#:)		Amount of Contribution (\$)	\$200.00
	Principal occu OMS	oation / Job title (See Instructions)		Employer (See Instructions	5)		
			•				

	MONET	ARY POLITICAL CONTR	IS		SCHEDUL	E A1	
	The Instru	ction Guide explains how to comp	olete this for	m.	1	Total pages Schedule A1: Sch: 9/20 Rpt: 12/23	
2	FILER NAME Texas Oral a	und Maxillofacial Surgeons Political Actic	on Committee		3	Filer ID (Ethics Commission 00058206	n Filers)
4	Date 10/31/2024	McNeill, Robert (Dr.)	ate PAC (ID#:)	7	Amount of Contribution (\$)	\$200.00
		Garland, TX 75040					
8	Principal occu OMS	pation / Job title (See Instructions)	9	Employer (See Instructions	i)		
	Date 11/07/2024	McPhillips, Andrea (Dr.) Contributor address; City; State; Zip Cod	ate PAC (ID#:			Amount of Contribution (\$)	\$200.00
	Principal occu	Stephenville, TX 76401 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Oral & Maxil	ofacial Surgeon		self			
	Date 12/17/2024	Full name of contributor out-of-st McPhillips, John (Dr.) Contributor address; City; State; Zip Cod	ate PAC (ID#:)		Amount of Contribution (\$)	\$200.00
		Bedford, TX 76021					
		pation / Job title (See Instructions) ofacial Surgeon		Employer (See Instructions self)		
	Date 10/31/2024	Moses, Jeffrey (Dr.)				Amount of Contribution (\$)	\$200.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/03/2024	Full name of contributor out-of-st Mosquera, Camillo (Dr.) Contributor address; City; State; Zip Cod Galveston, TX 77555	ate PAC (ID#:)		Amount of Contribution (\$)	\$200.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			,				

	MONET	ARY POLITICAL (SCHEDULE A1				
	The Instruc	ction Guide explains how	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 10/20 Rpt: 13/23	
2	FILER NAME Texas Oral a	and Maxillofacial Surgeons Po	litical Action Committe	e		3	Filer ID (Ethics Commission 00058206	n Filers)
4	Date 11/07/2024	5 Full name of contributor Nguyen, Thinh (Dr.)6 Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code)	7	Amount of Contribution (\$)	\$200.00
8	Principal occu	Amarillo, TX 79119 pation / Job title (See Instructions	<u>, </u>	0	Employer (See Instructions	<u>''</u>		
0		lofacial Surgeon)	9	Self	·)		
	Date 10/31/2024	Full name of contributor Ornstein, Sharon (Dr.) Contributor address; City; St)	•	Amount of Contribution (\$)	\$200.00
		Frisco, TX 75034						
	Principal occu OMS	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 11/07/2024	Full name of contributor Parekh, Ketan (Dr.) Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code			•	Amount of Contribution (\$)	\$200.00
		Rockwell, TX 75032						
	•	pation / Job title (See Instructions Iofacial Surgeon)		Employer (See Instructions	s)		
	Date 11/05/2024	Full name of contributor Park, Jin (Dr.) Contributor address; City; St Bastrop, TX 78602)	•	Amount of Contribution (\$)	\$200.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/04/2024	Full name of contributor Parmer, David (Dr.) Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code)		Amount of Contribution (\$)	\$200.00
	·	pation / Job title (See Instructions Iofacial Surgeon)		Employer (See Instructions self	s)		
		<u>-</u>						

	MONET	ARY POLITICAL CO	ONTRIBUTION	IS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to	o complete this for	m.	1	Total pages Schedule A1: Sch: 11/20 Rpt: 14/23	
2	FILER NAME Texas Oral a	and Maxillofacial Surgeons Politio	cal Action Committee		3	Filer ID (Ethics Commission 00058206	n Filers)
4	Date 12/19/2024	5 Full name of contributor Patton, Michael (Dr.)6 Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code		7	Amount of Contribution (\$)	\$200.00
_	Deinstead	Austin, TX 78759	la.	Faralas a (O. a. la atractica	$\overline{\Gamma}$		
8		pation / Job title (See Instructions) lofacial Surgeon	9	Employer (See Instructions	5)		
	Date 11/03/2024	Full name of contributor Pavelka, Jason (Dr.) Contributor address; City; State				Amount of Contribution (\$)	\$200.00
		Plano, TX 75023	1				
	•	pation / Job title (See Instructions) lofacial Surgeon		Employer (See Instructions self	5)		
	Date 12/03/2024	Full name of contributor Perez, Daniel (Dr.) Contributor address; City; State	out-of-state PAC (ID#: e; Zip Code)		Amount of Contribution (\$)	\$200.00
		San Antonio, TX 78229					
	Principal occu OMS	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/03/2024	Full name of contributor Quirk, George (Dr.) Contributor address; City; State Houston, TX 77063				Amount of Contribution (\$)	\$200.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Date 09/13/2024	Full name of contributor Robinson, Samuel (Dr.) Contributor address; City; State	out-of-state PAC (ID#: e; Zip Code			Amount of Contribution (\$)	\$200.00
	Principal occu OMS	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			1				

	MONET	ARY POLITICAL CONTRIBU	TIOI	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete th	nis foi	rm.	1	Total pages Schedule A1: Sch: 12/20 Rpt: 15/23	
2	FILER NAME Texas Oral a	nd Maxillofacial Surgeons Political Action Comi	mittee		3	Filer ID (Ethics Commission 00058206	n Filers)
4	Date 07/03/2024	 Full name of contributor			7	Amount of Contribution (\$)	\$200.00
_	Dringing! aggr	Cypress, TX 77429	lo.	- Employer (Co.) Instructions	<u></u>		
8		pation / Job title (See Instructions) ofacial Surgeon	g	Employer (See Instructions	5)		
	Date 12/26/2024	Full name of contributor ut-of-state PAC (Salgueiro, Martin (Dr.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$200.00
		Amarillo, TX 79106					
		oation / Job title (See Instructions) ofacial Surgeon		Employer (See Instructions	s)		
	Date 10/31/2024	Full name of contributor out-of-state PAC (Schafer, Brad (Dr.) Contributor address; City; State; Zip Code	(ID#:			Amount of Contribution (\$)	\$200.00
		Temple, TX 76502					
		pation / Job title (See Instructions) ofacial Surgeon		Employer (See Instructions	5)		
	Date 12/29/2024	Full name of contributor out-of-state PAC (Seeba, Garrett (Dr.) Contributor address; City; State; Zip Code Webster, TX 77598)		Amount of Contribution (\$)	\$200.00
		oation / Job title (See Instructions) ofacial Surgeon		Employer (See Instructions self	5)		
	Date 10/31/2024	Full name of contributor out-of-state PAC (Shepard, William (Dr.) Contributor address; City; State; Zip Code Houston, TX 77063	(ID#:			Amount of Contribution (\$)	\$200.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
			I				

	MONET	ARY POLITICAL (CONTRIBUTIO	N	S		SCHEDUL	E A1
	The Instruc	ction Guide explains hov	v to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 13/20 Rpt: 16/23	
2	FILER NAME Texas Oral a	and Maxillofacial Surgeons Po	olitical Action Committe	e		3	Filer ID (Ethics Commission 00058206	n Filers)
4	Date 11/03/2024	5 Full name of contributor Shirley, Brett6 Contributor address; City; S	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$200.00
8	Principal occu	Nacoghoches, TX 75965 pation / Job title (See Instruction:	e) I	<u>a</u>	Employer (See Instructions	=)		
0		lofacial Surgeon	5)	9	self	·)		
	Date 11/05/2024	Full name of contributor Shrewsberry, Cecil (Dr.) Contributor address; City; S)	•	Amount of Contribution (\$)	\$200.00
		Huntsville, TX 77340						
	Principal occu OMS	pation / Job title (See Instructions	5)		Employer (See Instructions	s)		
	Date 11/11/2024	Full name of contributor Siew, Michael (Dr.) Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$200.00
		El Paso, TX 79925						
	Principal occu OMS	pation / Job title (See Instructions	5)		Employer (See Instructions	s)		
	Date 11/04/2024	Full name of contributor Smith, Scott (Dr.) Contributor address; City; S Houston , TX 77030)	•	Amount of Contribution (\$)	\$200.00
	•	pation / Job title (See Instructions lofacial Surgeon	5)		Employer (See Instructions	5)		
	Date 07/05/2024	Full name of contributor Spingola, Dean (Dr.) Contributor address; City; S Irving, TX 75063	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$200.00
	Principal occu	pation / Job title (See Instruction:	5)		Employer (See Instructions	5)		

	MONEI	ARY POLITICAL (CONTRIBUTION)NS		SCHEDUL	E A1	
	The Instru	ction Guide explains hov	to complete this 1	form.	1	Total pages Schedule A1: Sch: 14/20 Rpt: 17/23		
2	FILER NAME				3	3 Filer ID (Ethics Commission Filers)		
	Texas Oral a	and Maxillofacial Surgeons Po	olitical Action Committe	ee		00058206		
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	# 000.00	
	12/23/2024	Stroia, Luciano (Dr.)			-		\$200.00	
		6 Contributor address; City; S	late; zip Code					
_	Delicate at a second	Harlingen, TX 78550		O Franks on (O a landoustica)	<u></u>			
8	OMS	pation / Job title (See Instructions	5)	9 Employer (See Instructions	5)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)		
	11/04/2024	Tran, David (Dr.)					\$200.00	
		Contributor address; City; S	tate; Zip Code					
		Houston , TX 77005						
		pation / Job title (See Instructions	5)	Employer (See Instructions	s)			
	Oral & Maxil	lofacial Surgeon		Self				
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)		
	11/03/2024	Tye, Christopher (Dr.)					\$200.00	
		Contributor address; City; S colleyville, TX 76034	tate; Zip Code					
	Principal occu	pation / Job title (See Instructions	<u> </u>	Employer (See Instructions	<u> </u>			
	doctor	(,	self	,			
	Date	Full name of contributor	out-of-state PAC (ID#:	1	Π	Amount of Contribution (\$)		
	12/18/2024	Vergara, Sandra (Dr.)				(.,	\$200.00	
		Contributor address; City; S	tate; Zip Code					
		Wichita Falls, TX 76309						
	Principal occu OMS	pation / Job title (See Instructions	5)	Employer (See Instructions	5)			
	Date	Full name of contributor	out-of-state PAC (ID#:			Amount of Contribution (\$)		
	08/22/2024	Verrett, Adam (Dr.)					\$200.00	
		Contributor address; City; S	tate; Zip Code					
		San Antonio, TX 78229						
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	5)			
	Oral & Maxil	lofacial Surgeon		Self				

	MONEI	ARY POLITICAL (CONTRIBUTION)NS		SCHEDUI	LE A1
	The Instru	ction Guide explains hov	to complete this f	orm.	1	Total pages Schedule A1: Sch: 15/20 Rpt: 18/23	
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)
	Texas Oral a	and Maxillofacial Surgeons Po	litical Action Committe	ee		00058206	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_		7	Amount of Contribution (\$)	
	12/03/2024	Wallace, John (Dr.)					\$200.00
		6 Contributor address; City; S	tate; Zip Code				
_		Dallas, TX 75231		Ia = 1 /a 1	Ĺ		
8	Principal occu OMS	pation / Job title (See Instruction:	5)	9 Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	11/25/2024	Walstad, William (Dr.)					\$200.00
		Contributor address; City; S	tate; Zip Code				
		Dallas, TX 75230					
		pation / Job title (See Instructions	5)	Employer (See Instructions	s)		
	Oral & Maxil	lofacial Surgeon		self			
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	11/24/2024	Warren, R. Scott (Dr.)					\$1,041.65
		Contributor address; City; S Waco, TX 76712	tate; zip Code				
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	<u>L</u> S)		
	•	lofacial Surgeon	,	self	•		
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Т	Amount of Contribution (\$)	
	12/04/2024	Waters, Patrick (Dr.)	_ ` -			,,	\$200.00
		Contributor address; City; S	tate; Zip Code				
	Delegale at a second	Wichita Falls, TX 76308			<u> </u>		
		pation / Job title (See Instructions acial Surgeons	5)	Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	10/31/2024	Weil, Thomas M. (Dr.)					\$200.00
		Contributor address; City; S Houston, TX 77063	tate; Zip Code				
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	<u>L</u>		
	OMS	,	,	F - 55. (222 mondone)	,		

	MONET	ARY POLITICAL C	CONTRIBUTIO	N	S		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	orn	n.	1	Total pages Schedule A1: Sch: 16/20 Rpt: 19/23	
2	FILER NAME Texas Oral a	and Maxillofacial Surgeons Po	itical Action Committee	Э		3	Filer ID (Ethics Commission 00058206	n Filers)
4	Date 11/03/2024	5 Full name of contributor Wendling, Bert (Dr.)6 Contributor address; City; St.	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$200.00
		Dallas, TX 76262	,					
8		pation / Job title (See Instructions Iofacial Surgeon)	9	Employer (See Instructions Self	s) 		
	Date 12/13/2024	Full name of contributor Whitcomb, Michael (Dr.) Contributor address; City; St	out-of-state PAC (ID#:			•	Amount of Contribution (\$)	\$200.00
	Principal occu	Grapevine, TX 76051 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	•	acial Surgeons			, . , . (,		
	Date 12/24/2024	Full name of contributor Zarroug, Najy (Dr.) Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code)	•	Amount of Contribution (\$)	\$200.00
		Round Rock , TX 78681						
		pation / Job title (See Instructions Iofacial Surgeon			Employer (See Instructions self	s)		
	Date 11/03/2024	Full name of contributor Zuniga, John (Dr.) Contributor address; City; St. Dallas, TX 75390	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$200.00
	Principal occu OMS	pation / Job title (See Instructions			Employer (See Instructions	5)		
	Date 08/19/2024	Full name of contributor al-obaidi, mohammed (Dr. Contributor address; City; St. dallas, TX 75208	•				Amount of Contribution (\$)	\$200.00
	Principal occu doctor	pation / Job title (See Instructions			Employer (See Instructions self	s)		

	MONEI	ARY POLITICAL (CONTRIBUTIO	N	IS		SCHEDUL	E A1
	The Instruc	ction Guide explains how	to complete this fo	orı	n.	1	Total pages Schedule A1: Sch: 17/20 Rpt: 20/23	
2	FILER NAME					3	Filer ID (Ethics Commission	n Filers)
	Texas Oral a	and Maxillofacial Surgeons Po	litical Action Committe	е			00058206	
4	Date 11/04/2024	5 Full name of contributor al-obaidi, mohammed (Dr6 Contributor address; City; St)	7	Amount of Contribution (\$)	\$200.00
Ω	Principal occur	dallas, TX 75208 pation / Job title (See Instructions		a	Employer (See Instructions			
0	doctor	pation / Job title (See Instructions)	9	self)		
	Date 11/25/2024	Full name of contributor anver, tamir Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code	<u> </u>)		Amount of Contribution (\$)	\$200.00
	Dringing conu	flower mound, TX 75028	<u> </u>		Employer (Co.) Instructions	<u>, </u>		
	OMS	pation / Job title (See Instructions)		Employer (See Instructions	·)		
	Date 11/03/2024	Full name of contributor bates, James (Dr.) Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code)		Amount of Contribution (\$)	\$200.00
		dallas, TX 75205						
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>. </u>		
	Surgeon				Self			
	Date 07/29/2024	Full name of contributor bonasso, franklin (Dr.) Contributor address; City; St austin, TX 78705	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$200.00
	Principal occu doctor	pation / Job title (See Instructions)		Employer (See Instructions self	5)		
	Date 11/04/2024	Full name of contributor chavda, anish (Dr.) Contributor address; City; St Houston, TX 77049	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$200.00
	Principal occu doctor	pation / Job title (See Instructions			Employer (See Instructions self	s)		
								

	MONET	ARY POLITICAL CONTR	IBUTION	S		SCHEDUI	E A1
	The Instruc	ction Guide explains how to comp	lete this for	n.	1	Total pages Schedule A1: Sch: 18/20 Rpt: 21/23	
2	FILER NAME Texas Oral a	and Maxillofacial Surgeons Political Action	n Committee		3	Filer ID (Ethics Commission 00058206	on Filers)
4	Date 10/19/2024	 Full name of contributor out-of-stardar, samer Contributor address; City; State; Zip Cod 			7	Amount of Contribution (\$)	\$5,000.00
_		houston, TX 77024					
8	Principal occu OMS	pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Date 10/31/2024	evans, todd Contributor address; City; State; Zip Cod				Amount of Contribution (\$)	\$200.00
		temple, TX 76502 pation / Job title (See Instructions)		Employer (See Instructions)		
	doctor			self			
	Date 11/05/2024	Full name of contributor out-of-sta franco, pedro (Dr.) Contributor address; City; State; Zip Cod	ate PAC (ID#: e			Amount of Contribution (\$)	\$200.00
		irving, TX 75062					
	Principal occu doctor	pation / Job title (See Instructions)		Employer (See Instructions self)		
	Date 10/30/2024	gossett, james (Dr.))		Amount of Contribution (\$)	\$200.00
	Principal occu doctor	pation / Job title (See Instructions)		Employer (See Instructions self)		
	Date 12/16/2024	lopez, jose (Dr.)				Amount of Contribution (\$)	\$200.00
	Principal occu doctor	pation / Job title (See Instructions)		Employer (See Instructions self)		
			•				

	MONET	ARY POLITICAL C	ONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 19/20 Rpt: 22/23	
2	FILER NAME Texas Oral a	and Maxillofacial Surgeons Pol	itical Action Committee		3	Filer ID (Ethics Commission 00058206	n Filers)
4	Date 10/31/2024	5 Full name of contributor lovoi, john (Dr.)6 Contributor address; City; State	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$200.00
_	Deireirel	league city, TX 77573	1,) Farabasa (Cara ta structions	<u></u>		
8	doctor	pation / Job title (See Instructions		Employer (See Instructions	5)		
	Date 08/19/2024	Full name of contributor marshall, Scott (Dr.) Contributor address; City; Sta				Amount of Contribution (\$)	\$200.00
		El Paso, TX 79912					
	Principal occu OMS	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 08/19/2024	Full name of contributor rasmussen, jay (Dr.) Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$200.00
		austin, TX 78746					
	Principal occu doctor	pation / Job title (See Instructions		Employer (See Instructions self	5)		
	Date 07/01/2024	Full name of contributor read, lance (Dr.) Contributor address; City; Statemple, TX 76508				Amount of Contribution (\$)	\$200.00
	Principal occu doctor	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 10/31/2024	Full name of contributor shillingburg, john (Dr.) Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$200.00
	Principal occu doctor	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			<u>'</u>				

	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: 20/20 Rpt: 23/23	
2	FILER NAME Texas Oral a	and Maxillofacial Surgeons Political Action Committe	e	3	Filer ID (Ethics Commissio 00058206	n Filers)
4	Date 08/16/2024	5 Full name of contributor out-of-state PAC (ID#:_ vance, phillip (Dr.) 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$200.00
8	Principal occu	temple, TX 76508 upation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u> s)		
	doctor		self			
	Date 08/22/2024	Full name of contributor out-of-state PAC (ID#:_wang, tim kun Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$200.00
		wichita falls, TX 76308				
	Principal occu doctor	upation / Job title (See Instructions)	Employer (See Instructions	s) 		
	Date 11/04/2024	Full name of contributor out-of-state PAC (ID#:_wang, tim kun Contributor address; City; State; Zip Code wichita falls, TX 76308			Amount of Contribution (\$)	\$200.00
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> S)		